

**Problems of Breast Feeding and Infant Weaning
Faced by Women Working in the Organised
and Unorganised Sectors**

(A Project Sponsored by ICMR)

SHANTA KOHLI CHANDRA

M.LAKSHMISWARANNA

**THE INDIAN INSTITUTE OF PUBLIC ADMINISTRATION
Indraprastha Estate, Ring Road
New Delhi-110002**

August 1989

IIPA LIBRARY



12285

ACKNOWLEDGEMENTS

The study had been sponsored and funded by the Indian Council for Medical Research. We are thankful to the Council and all the officials who have extended their support at various stages of the study.

Shri R.N.Gupta, Assistant Director General and Principal Investigator for the All-India Study needs a special mention as he had been very helpful throughout the project.

Our thanks are due to Shri Uma Shankar, Director, IIPA who had evinced keen interest in the study.

The study would not have been possible but for the cooperation we have received from the authorities of various Government organizations, schools and industrial establishments. The employers of construction and agricultural labour also permitted us, after persuasion to interview their workers. Our thanks to all of them.

We are thankful to Smt. Kusum Bhargava Research Officer who ably supervised the research staff at the time of data collection and coding and helped in computer tabulation and analysis. She also wrote the chapter on Method of Study. Our thanks are also due to our research staff Dr. (Smt.) Indresh Ahluwalia and Smt. Sarojini Vats^{who} had ably assisted us at various stages of the study. Smt. Bimla Sharma helped us in identifying and contacting the rural respondents. We thank her for her help.

Last but not the least, our special thanks are due to Shri B.S.Rana for ably and efficiently typing the report.

Shanta Kohli Chandra

M.Lakshmiswaramma

CONTENTS

		<u>Page</u>
Chapter I	The Problem	1-20
Chapter II	Method of Study	21-27
Chapter III	Socio-Economic Background	28-38
Chapter IV	Work Environment	39-71
Chapter V	Attitudinal Orientation	72-112
	Conclusions & Suggestions	113-130

CHAPTER - 1

The Problem

Introduction

Breast feeding has been recognized all over the world as the most crucial factor in the physical, mental and emotional growth of a child. Besides meeting all the nutritional requirements of the infant in the early stages of life, breast feeding helps to promote and strengthen the bonds of affection between mother and child which is very essential in the building up of his/her self confidence in later years. Traditional societies also recognized the importance of breast feeding and majority of mothers have been breast feeding their children.

Breast feeding practices, such as, duration of full breast feeding, time of introducing milk substituting food, weaning time and practices, however, vary from one community and culture to another. They are generally related to the traditional norms, beliefs, socio economic status and the overall life style of a particular family, class or culture.

In the past few decades, especially from 1980s, there has been perceptible decline in breast feeding of children. There occurred changes in breast feeding practices also. The

reasons for this are several. The most important reason is the advent of industrialization and consequent modernization and urbanization of societies leading to changes in social structures and the socio-economic environment of the family and community around. The system of extended family with its emphasis on tradition has given way, in the process of rural to urban migration, to small nuclear family cut off from its roots and traditions. A practice like breast feeding which had widely been accepted in traditional societies, is being considered old fashioned and outmoded in the modern context and those adopting it are considered to be traditional, orthodox and backward.

The economic conditions or rather economic compulsions have led women to take up work outside home. In the traditional, mostly rural, societies also women worked but the nature of the work was so organized that it did not impinge upon personal and family life. In fact the family ties and family relations extended to work life and the joint family system offered support to women in child rearing. In contrast to this, the work relationships in the modern urban organized sector and to some extent even in unorganized sector are different and the relationships are contractual in nature and therefore have a strong element of formalism. These changed circumstances have

also influenced the pattern of beliefs, norms and practices regarding sustained and prolonged breast feeding and weaning.

Another reason for decline in breast feeding is the alternatives offered by scientific and technological innovations which to some extent motivated women to give up traditional practice of breast feeding. The new technology of feeding infants by way of formula preparations, feeding bottle and cereal foods developed by the industrialized societies have not only influenced breast feeding practices in those countries but also those in developing countries. The demonstration effect of the urban upper strata of society on rural and less well off sections is stated to be considerable.

The percolation effect of the new technology which is mentioned above has also been very rapid and deeprooted in the context of the introduction of powerful mass media such as radio and television. Bottle feeding and baby foods proved to be costly not only in monetary terms but also in terms of their hazardous effect on the healthy growth of child and his/her immunity to disease. The natural mother-child interaction process in breast feeding which is psychologically rewarding to both mother and child is also disturbed, leading to emotional

problems to the child in later years of life.

Review of Literature

1. Studies conducted in Developing Countries

The declining trend of breast feeding and changes in breast feeding and weaning practices in urban and rural areas had been dealt with in some of the studies undertaken in developing countries. Studies conducted in Africa found out that about 95 percent of infants were breast fed upto the age of 3-5 months and about 90 percent until the age of 11 months. The caribbean survey (1969) and Lucia Survey (1974) reported weaning of the infants at an early age. A WHO supported study of nine countries on contemporary patterns of breast feeding, found 79 percent and 98 percent breast feeding of infants in Philippines and Guatemala respectively. Moreover, the study reported no variation in urban rural proportions in this respect in most of the countries including India. Further, the study reported that in both rural and urban areas equal proportion of children were being breast fed upto the age of nine months. The urban rural differential in the pattern of breast feeding was found to be more prominent in Latin America as compared to the Asian countries.¹

In rural Bangladesh, babies are traditionally breast fed till the first 6 months of life. In a hospital based study of 500 urban mothers, 50 percent were reported to have given up breast feeding in the first six months due to subsequent pregnancy (Quader 1979). Results of surveys conducted by the Institute of Population Studies of Chulalongkorn University, Thailand, indicate a moderate and relatively steady decline in the duration of breast feeding among both rural and urban women. The survey estimated that between 1969 and 1979 the decline is from 22.4 months to 17.5 months for rural and from 12.9 months to 9.0 months for urban children. Data from Thailand's contraceptive prevalence Survey II showed important new information on infant feeding practices with respect to full breast feeding, supplemental feeding and post-paritum, amenorrhea. The results indicate that Thai mothers in both rural and urban areas introduce supplemental food within the first few months thus reducing the length of full breast feeding.²

Rangoon-study (1971) revealed average period of breast feeding as 13 months. But quarter of the sample infants were weaned off by 4-6 months due to the most common reason being the next pregnancy. Another study (1957) conducted in Burma reported that 13.37 percent rural mothers stopped

breast -- feeding due to insufficient lactation. On the other hand a rural survey (1975) revealed that cent percent babies were being breast fed at 6 months of age, out of which 69 percent were totally breast fed and 11 percent children were being breast fed even at 3 years of age (Min.1974). In Java, Bali and South Sumatra (Indonesia) majority of mothers nurse their babies until 2-3 years. The weaning off age in all other rural areas is over 2 years while in urban areas about a third of infants are not breast fed beyond 10-12 months. Socio-economic and educational level of mothers is related to the duration of breast feeding. Mothers having higher level of education were feeding children for a shorter period. The reasons for cessation of breast feeding vary. In central Java, the main reasons are the next pregnancy and child's refusal to take milk(Sugion, 1979).

In Malaysia, there is a significant difference in breast feeding practices between rural and urban areas; the decline in breast feeding practices is seen mainly in the cities. A study (1978) showed that only 30 percent mothers solely breast fed their infants in urban areas out of which only half could do so for 3 months only (Abdhullah and Abraham, 1979). In

Nepal, customarily the breast milk is the principal food for infants upto 5-6 months when the local rice feeding ceremony is performed. Nepal's Fertility Survey (1976) revealed that 82 percent monthers breast fed their children upto 24 months or more (Thapa, 1979). In Pakistan, Diarrhoea Research Programme carried out a survey of the children under 2 years of age belonging to lower middle and lower socio-economic groups and found that 20 percent were fully breast fed, 45 percent were mixed fed and 34 percent were bottle fed. Another study (1976-78) reported 75 percent mothers in semi-rural areas breast fed their babies under 6 months but subsequently there was a sharp decline in breast feeding (Khan, 1979).
about
Port Moresby, Popua, New Guinea Survey (1976) showed that one third of the sample children under 2 years of age were being artificially fed. Of these artificially fed children 69 per cent were found to be malnourished. A repeat survey (1979) showed that only 12 percent of the sample children were being artificially fed, compared with the earlier 35 percent (Beddulph, 1979).

It was observed in Butz et al (1982) study that infants who were fully breast fed (i.e. consumption of breast milk as the only nutrient source except water) during the first month

of life had reduced mortality risk both in the first month and in the next five months of life regardless of feeding status in the latter period. According to another study infants receiving no breast milk are twenty five times more likely to die in the first six months of life than those infants who are exclusively breast fed (Mazumdar M. Hindustan Times Magazine section , 13 May, 1989).

Another study by Annika Bornstein (1974) ³ brings out that infant feeding practices in Yemen are governed by tradition and religion. As quoran prescribes two years breast feeding, most children were breast fed upto that age. Out of the 53 rural women working in the textile industry, 35 mothers stated that their pattern of working hours did not permit them to fully breast feed the child. In Bangladesh, it was found (Chen et al 1979) that during peak harvest season, suckling frequency gets reduced although mothers work on their own farms. In Gambia also it was found that women reduced breast feeding frequency with increased work load (Lunn et al 1981).

Empirical research has established that breast feeding postpones the return of ovulation and thereby chances of

pregnancy. A prospective child health study in Gaza by John E Anderson et al (1986) and study by K.Prema et al showed a strong relationship between breast feeding and two major components of birth intervals- the post-partum anovulatory period and the waiting time to conception.

2. Contemporary Indian Studies

A Chandigarh study of 670 mothers, revealed 36.7 percent of children had unplemented breast feeding, 18.3 percent were weaned off and about 45 percent were given breast as well as artificial milk until four months of age. Another prospective study of 230 babies followed up regularly upto 2 years revealed 71.5 percent babies had unplemented breast feeding upto 4 months of age. Other studies done in Chandigarh and Haryana have also revealed relationship of duration of breast feeding with socio-economic status of mothers. Women even in rural areas, who belonged to the upper socio-economic status were found to introduce artificial feeding to children at an early age. Lower status mothers attempted artificial feeding at the time of insufficient lactation while upper and middle status mothers introduced bottle feeding at the age of 2 months. In another study, out

of 123 babies, 72.3 percent were completely weaned even before 2 months of age while the rest at 4 months. The growth of babies with supplemented breast milk was better than the babies weaned before 3 months of age. Significant differences in feeding patterns were noted between educated and illiterate families. Educated mothers showed better growth of their babies. But the heights were found similar across the groups. The morbidity among the artificially fed Chandigarh infants was reported double at the age of 4 months. Diarrhoea alone was 4 time higher among them as compared to breast fed infants. But the respiratory infections were found similar. Among the rural artificially fed infants diarrhoea and acute respiratory infections were found higher as compared to urban breast fed infants at the age of 4 months.⁴

A study in Orissa found 83 percent discarded colostrum and attempted supplementary feeding at 2 months of age (Devi & Behera, 1980). Madhya Pradesh Tribal mothers' mean duration of breast feeding was reported to be 35.6 months. Another study (Puri et al 1976) reported full breast feeding of children upto 6 months of age among 46 percent of sample infants and weaning among 5.6 percent infants at the same age. An

urban study by Bhatnagar (1983) reported that only 22.6 per cent babies of six months age are being solely breast fed. There were 54.7 percent of babies who were mixed fed at 3 months of age (Datta Banik, 1975).

In a prospective study, out of 59 babies who were solely breast fed successfully upto 3 months of age ^{one} / baby only died whereas out of 50 weaned before 3 months age, 4 babies died before completing one year of age. In another prospective study of 600 babies followed up upto one month of age, 8 babies were breast fed and 17 switched over to bovinemilk until they died. While out of 575 surviving babies 516 were successfully breast fed and 59 were switched over to bovine mil. In another 4 villages study by Vijay Kumar (1983) of 291 infants followed up at 4 weeks age, 260 were successfully breast fed and 31 were switched to bovinomilk or completely weaned off. Out of the aggregate, the death of breast fed babies was just half (3) as compared with the death of (6) weaned babies.

There are some more Indian studies which dealt with smaller size sample data. However, they give us an indication of the declining trend and the changing scenario. Shalini Bhogle's ⁵ study deals exclusively with weaning practices among caste Hindus, backward castes and muslims. It was found that Muslims

wean the child late, that is two years (Quran prescribes so) than the other two groups. They also hold the belief that they do not conceive as long as they breast feed their child.

The study by Malkit Kaur(et al) brought out that children were breast fed from the third day of birth and it was done because it was customary and that it is good for child's health. Children were breast fed upto a mean age of 30.9 months: supplementary foods were introduced at the age of 16.5 months.

Bhoota Kamala's study was based on 50 Marathi and 50 Gujarati mothers belonging to middle class families most of them caste Hindus and educated. About 88 percent of the mothers in each group breast fed their babies. The mean duration of breast feeding for Gujarati and Marathi mothers was 13 and 6 months respectively; 78 percent of Gujarati and 96 percent of Marathi mothers breast fed their children without any fixed schedule. Gujarati mothers started weaning at the age of 19.5 months as against 15.7 months of Marathi mothers.

The study by Chandrakala was based on survey of 100 tribal monthers conducted in selected villages of two panchayat Samities, in Udaipur district of Rajasthan. Almost all the mothers were uneducated, belong to joint as well as nuclear

families and were in Rs. 400 to Rs. 1000 per month family income group. The study observes that the mothers have either inadequate or negligible knowledge regarding infant feeding practices. They breast feed the children not because they know its advantages but hold on to certain beliefs and practices and are rooted in traditions. They simply adhere to the practices followed by their mothers and grand mothers.

⁹
Another study on tribal women in Andhra Pradesh (Chenchus) brought out that they breast feed their children upto three years.of age and generally feed them on demand. Supplementary food was introduced between 6 and 9 months of age. They breast fed longer/^{as} they believe that chances of pregnancy are low if the child is breast fed. The mean duration of lactation/^{was} found to be 20-64 months. .

An ICMAR supported study on development and evaluation of educational and communication materials for promotion of un-supplemented breast feeding and current feeding practices has been completed at PGI, Chandigarh.

An ICMR sponsored multicentric study on impact of current Hospital Practices on Breast Feeding conducted in Delhi, Aligarh and Pondicherry aims to study (1) the knowledge and

attitude towards breast feeding and other infant feeding practices among hospital staff and knowledge, attitude and practices of breast feeding among women (2) identify factors in hospital policies and practices relevant to prenatal care which may influence breast feeding, (3) determine the percentage of such women who are able to successfully establish un-supplemented lactation, and (4) develop strategies for promotion of breast feeding.

Another study on current breast feeding practices in tribal areas of India was also sponsored by ICMR at 8 centres. The study is focussed on feeding practices and reasons which lead to "milk insufficiency". The study aims to guide strategy formulation for suitable interventions for promotion of breast feeding and current infant feeding practices.

Another study on utilising indigenous dais for educating and monitoring mothers on proper infant feeding has also been sponsored by ICMR. The study aims on sustained and continued role of dais in promoting infant feeding practices in rural areas. The dais are being studied as to how properly trained person they could help to improve the nutritional status of infants through ~~appropriate nutritional status of infants~~ through appropriate nutritional education to mothers.

Rationale for the Study

The traditional belief of the effect of breast feeding on prolonging postpartum amenorrhea and thereby preventing pregnancy has been tested scientifically. Various studies have established that full breast feeding delays next pregnancy, thereby enabling spacing of children. In August 1988, an international group met at Bellagio, Italy to review evidence about the use of breast feeding as a viable family planning method. After reviewing 11 prospective studies, the group reached a consensus that the maximum birth spacing effect of breast feeding is achieved when a mother fully or nearly fully breast feeds and remains a menorrhAGIC. It was agreed that full breast feeding delays pregnancy by six months and makes considerable contribution to securing a two year birth interval.

"There is abundant evidence to show that birth intervals of two or more years significantly enhance infant survival and reduce maternal morbidity, particularly in less developed countries..... Breast feeding should be regarded as a potential family planning method in all maternal and child health programmes". This new knowledge, in addition to its known beneficial effects on child health and survival has prompted the Governments of many of the developing countries, including

India, to look into the socio-cultural beliefs, norms and compulsions which reinforce or detract mothers to breast feed and follow certain breast feeding and weaning practices.

The effort ^{is towards} formulating governments' health policies and programmes taking an integrated view of the child's and mother's health and family planning methods. Some of the questions that are raised in the context are which section of women to be targetted as a priority group so that they can lead the rest? After identifying the group what are the socio-economic physical and cultural constraints impinging upon the mother's initial interest and intentions in fully breast feeding the child? What are their perceptions and knowledge regarding breast feeding and weaning practices? What are the ways in which they could be motivated to follow/ change the practices? What initiatives could they take and in what manner they could participate in any future child health and family planning programmes? In order to find answers to these it is essential to elicit information on the cultural norms and practices and socio-economic background of the family and the mother, her level of education and changing role, the type of activities she does inside and outside home and the amount

of time she spends in this regard. It is also essential to look into the attitudes of the working women towards breast feeding their ~~child~~ children in general and at work environments in particular. As some of the studies revealed, despite the initial intentions of the working mothers to fully breast feed their child, many of them have been unable to do so. It has also been noted that even when they take their children to work situations, they reduce the frequency of feeding when they are under pressure of work. In view of this it is very essential to know whether the mother's motivation to feed the child is due to their knowledge regarding the advantages of breast feeding or due to their simply following the traditional practice. If ^{it} is due to the former reason, there is no need to educate the mothers but only remove the constraints involved in their work environments. If it is the latter reason, the strategy would be to educate the mother's first about the advantages of breast feeding. One may also have to recognize the fact that the category of working women is not a very homogeneous group and the differences may be due to the differences in the nature of the jobs they do and the attendant work situations. An effort has therefore, to be made to find out the variations in urban rural women and women working in

organized and unorganized sectors. These factors have been kept in view in delineating the objectives of the study and in designing the questionnaire.

Data base is poor within and across the countries for systematic analysis of the factors influencing the infant feeding and weaning practices. Scientifically designed study is needed for obtaining comparable data on the above mentioned aspects which may help design appropriate policies and programmes to encourage breast feeding. The proposed study aims to meet this end.

Objectives of the Study

1. To study perception of breast feeding and supplementary feeding practices among the mothers working in organised and unorganised sectors.
2. To identify major problems related to breast feeding which need immediate policy consideration, the elimination of which may sustain and prolong breast feeding.
3. To study the intentions and initiatives of the mothers in order to overcome those problems.

The studies already carried out in the country generally have a smaller sample and are in smaller geographical areas.

Since the regional differences are broad and varied, generalisation is not very easy. More studies with bigger sample and spread are therefore needed to be undertaken for helping design suitable policies.

Since the problem of declining trend of breast feeding and weaning time is steady among working mothers in the lower middle and lower income groups, the proposed study aims to study this population both in urban organized industrial and unorganized agricultural sectors in different parts of the country. The present report is however confined to Union Territory of Delhi only. The next chapter deals with the methodology of the study.

References

1. Dr. S.Bhatnagar; Internationalship between Breast feeding, Infant Weaning Practices and Child Mortality (1983).
2. Breast feeding in Thailand: 'Data from the 1981 Contraceptive Prevalence Survey's John Knodel, Peerasit Kamnuan Silpa and Aphichat Chamrattrithirong. Studies in Family Planning; Vol. 13, Number 13, November, 1982, p.307-315.
3. Annika Bornstein - 'The Young Child in Yemen' in Assionment Children, October-December, 1974.
4. Vijay Kumar, Breast Feeding, Weaning and Infant Mortality- Case study, 1983
5. Shalini Bhogle: 'Child Rearing Practices among the Cultures', Social Change, Sept. 1978.
6. Malkit Kaur et al ; 'A study of a village in Haryana in The Indian Journal of Social Work, Vol. XLII, No.1, April, 1981.
7. Bhoota Kamala; 'Child rearing Practices' Social Welfare, Vol.XXIII, No.1, April, 1976.
8. Dave, Chandrakala; 'Infant feeding practices in Tribal Pockets of Udaipur', Social Welfare, June, 1985.
9. 'Subsistence Activities, Breast Feeding and Birth Spacing among the Chenchus - A food gathering Community in Andhra Pradesh' Journal of Family Welfare, Vol.XXVIII, No.3, March, 1982.
10. Mothers and Children - Bulletin of Infant Feeding and Maternal Nutrition - Supplement on Breast Feeding as a Family Planning Method; Vol.8, No.1, 1989.

CHAPTER II

METHOD OF STUDY

Having delineated the main concerns in the previous chapter, we shall now discuss the methods employed for conducting the study. As mentioned earlier our study mainly focuses on the attitudes and beliefs of the working mothers towards breast feeding practices and the problems they face in this regard. The socio-economic environment of the family the woman's exposure to the mass media, education, which includes and the work environment of the respondent/the type of activities she does inside and outside the house and the amount of time she spends in this regard are some of the important factors which have led to the declining trend of breast feeding and early weaning of the child. This declining trend is stated to be more visible in the case of the working mothers in present times.

The main objectives of the study are - (i) to study perception of working mothers both in urban and rural sectors towards breast feeding and supplementary feeding; (ii) to identify major problems related to breast feeding which could be related to the stresses and strains experienced at home

or at the work place; (iii) to study the intentions and initiatives of the mothers inorder to overcome these problems.

As the study was mainly confined to the mothers working in the organised and unorganised sectors, it was decided to select women from factories, Government offices, Schools, construction sites and agricultural labourers. Accordingly a list of industries/factories, schools and Government offices was prepared by the method of purposive sampling. In the selection of industries the major thrust was for the electronics industry and garment industry as the employment of women was higher in these industries. Similarly, to select the women working as primary teachers the schools were randomly selected from among the list of Municipal Schools, Central Schools and Private Schools. For the women working in the Government offices, different offices connected to or working under the Ministries of Health and Family Planning, Industries and Social Welfare were identified. In order to select the construction workers some construction companies were identified and their construction sites were visited to get the required number of workers.

For the selection of the women working as agriculture labourers Mehrauli Block and Najafgarh block were identified.

From among these blocks a number of villages were identified to get the required number of respondents. Before the selection of the villages the Anganwadis were contacted to get the list of the women working as agricultural labourers.

After identifying the units in the various groups efforts were made to select the required number of respondents. For the selection of respondents women were divided into three categories, namely, lactating and currently breast feeding, lactating but currently not breast feeding and first time pregnant mothers. These categories were taken with a view to give an overall picture of attitudes and opinions of experienced and inexperienced mothers. Thus these categories helped us to obtain ideas and attitudes and beliefs of the women who are not only currently lactating but also from those mothers whose children are below five years of age and from the first time expecting mothers. This enabled us to get an idea of their knowledge and attitude towards the breast feeding and its advantages, the problems they foresee and how they propose to solve these problems.

An aggregate sample of about 750 mothers working in organised and unorganised sectors was selected as per the

following break up:

<u>Organised Sector</u>	<u>No. of Respondents</u>
Industries	200
Government Offices	100
Schools	100
Construction Sites	100
<u>Unorganised Sector</u>	
Agriculture Labour	250

Total:	750

After having decided on the categories of respondents in each of the specified areas such as industry, Government offices, schools etc. an inflated number was worked out to allow margin for non-completion or non-availability of the respondents.

Tools for data Collection

A structured questionnaire was administered to the selected respondents to obtain information about their problems, attitudes, ideas and beliefs towards breast feeding practices, their social and cultural background problems encountered at the work place, facilities provided by the

employers. The questionnaire was designed to tap the following information:

- Socio-economic background of the respondents;
- Ideas and beliefs towards breast feeding practices;
- Problems encountered in breast feeding;
- Familial/Social support to successful breast feeding;
- Self intention and initiative towards breast feeding for overcoming the problems;
- Duration of unplemented breast feeding and weaning time.

The schedule was translated into Hindi. The translated schedule was standardised and pre-tested with a view to ascertain:

- the availability of the required information;
- the communication of the questions;
- the repetition of the questions;
- the objectivity of the questions.

Based on the experience of the pre-testing the schedule was finalized.

After the finalization of the schedule, the investigators were appointed and trained. The questionnaire was fully discussed with them with a view to acquaint them with the objectives of the study.

After deciding the respondents, the sample size, the appointment of investigators and the preparation of the schedule, initial contacts had to be made and permission had to be sought from the various employers. For instance, in case of municipal schools permission had to be sought from Education Officer Municipal Corporation. Likewise in case of factories, factory owners had to be contacted. In order to obtain permission from them appointments had to be fixed and the purpose of the study was to be explained. In some cases it meant several meetings as the decision had to come from higher authorities.

Limitations

The major problems faced in the collection of data were:

1. Locating the respondents in specified description in itself was a difficult task. For instance, locating women in the category of pregnant workers became very difficult.
2. Locating the respondents in specified categories was also difficult. In particular this problem was more serious in case of factory workers as not many factories employ women workers and at no rate such women who may claim maternity benefit. In the case of one factory we were specifically told that they employ only unmarried girls on contract basis and after they get married they terminate their services.

In view of this, we could obtain a sample of 187 respondents only as against the required 200 working mothers under this category. However, we interviewed more than the initially scheduled number of respondents from the category of Government servants and teachers -- 5 more included in the former and 8 * more in the latter case to make a total of 400 from the organized sector (excluding 100 construction labourers).

3. Locating and interviewing required number of respondents among the construction workers was difficult. The contractors objected interviewing them, more so during working hours. The same was true with the agriculture labour also.

4. Regarding lactating first time pregnant and not lactating categories we interviewed 108 first time pregnant (16 rural and 92 urban) 290 lactating (130 rural and 160 urban) and 248 non lactating (104 rural and 248 urban) mothers. We found it very difficult to get these categories of mothers distributed on occupational lines.

CHAPTER III

SOCIO-ECONOMIC BACKGROUND

Women's contribution to work force is not a new idea. From the time immemorial women have been contributing to the economy. With the change in time socio-economic scenario in which women work has changed. The demands of child bearing and child rearing on the working women were different in the traditional society than that of the modern society. The socio-economic environmental scene in which women work has taken a different turn in the modern society. This makes it difficult for working women to breast feed the child. The rural working women living closer to their work place do not find breast feeding as difficult as their urban counterparts.

The socio-economic background and the environment in which the working mothers have to work, have their effect on rearing of the children. The types of families they belong to, the occupations they are in, their age, income, caste and the distance they have to cover to their work place from home as well as the length of service and hours they have to put in, are some of the factors that affect breast feeding of the child.

A survey was carried out in Delhi covering 250 rural working mothers and 500 urban working mothers. Out of the 500 working mothers 100 belonged to construction work, and 400 to the industry, school teaching and government service.

Table No. 3.1

Age Distribution of Women (Area-wise)

Present Age (within bracket percentage)

		Present Age				Total	
Area	14 yrs. & Below	15-19	20-24	25-29	30-34	35-39	40 & above
Rural	0 (3.5%)	75 (30.3%)	69 (27.6%)	57 (22.8%)	28 (11.2%)	12 (4.5%)	250 (100.00)
Urban	0 (2.0%)	79 (15.7%)	228 (45.6%)	144 (29.0%)	32 (6.36%)	7 (1.4%)	500 (100.00)
Total	0	154	297	201	60	19	750

Age at the Time of Marriage

		Age at the Time of Marriage				Total
Area	14	15	16	17	18	250
Rural	81 (32.4%)	145 (58.0%)	24 (9.6%)	—	—	500
Urban	65 (13.1%)	66 (13.3%)	241 (48.2%)	120 (23.8%)	6 (1.2%)	750
Total	145	211	265	120	6	—

Table No.1 gives an account of the distribution of the working mothers according to their age.

Age-wise distribution of working mothers shows that in the rural area 32.4% women got married by the time they were 14 years old, 58% got married between 15-19 years and only 9.6% got married between 20-24 years. In the urban area the number of women who got married by the time they were 14 years old was 13.1%, between 14-19 years 48.2%, between 20-24 years, 23.8% and 25-29 years 13.3% and only 1.6% at the age of 30 and above. In the rural area a little over 90% got married before they were 20 years old whereas the urban percentage for this was only 26.4

Table No.3.2
Distribution of Women Religion Wise

Area	Hindu	Muslim	Sikh	Christian	Other	Total
Rural	245 (98%)	5 (2%)	-	-	-	250
Urban	451 (92.2%)	4 (0.8%)	24 (4.8%)	11 (2.2%)	-	500
Total	705	9	24	11	-	750

Majority of the rural women (98%) belonged to Hindu religion. Only 2% were Muslims. In the Urban area too majorit

(92.2%) belonged to Hindu religion, 4.8% were Sikh, 2.2% Christian and 0.8% Muslims

Table No.3.3
Distribution of Women According to Caste

Area	Forward	Backward	Low	Not Applicable	Total
Rural	36 (14.4%)	53 (21.2%)	156 (62.4%)	5 (2%)	250
Urban	372 (74.4%)	25 (5%)	63 (12.6%)	40 (8%)	500
Total	408	78	219	45	750

In the rural area 62.4% women belonged to low caste, 21.2% to backward caste and 14.4% to forward caste. As 2% were Muslims this question was not applicable to them. In the urban area 74.4% belonged to forward caste, 12.6% to low caste and 5% to backward caste. As 8% women belonged to religion other than Hindu, this question was not applicable to them. In the rural sample 83.6% women belonged to either backward or low caste whereas in the urban area about 3/4th belonged to forward caste. The percentage for backward and low combined was only 17.6%.

Table No.3.4
Distribution of Women According to Education

Area	Illiterate	Can read & write	Primary	Middle	Hr.Sec./ Matric	Graduate & above	Total
Rural	161 (64.4%)	2 (9.0%)	7 (2.8%)	27 (10.8%)	26 (10.4%)	27 (10.8%)	250
Urban	100 (20.0%)	-	6 (1.2%)	17 (3.4%)	125 (25.0%)	252 (50.4%)	500
Total	261	2	13	44	151	279	750

Education-wise distribution shows that in the rural sample about 3/4th women were either illiterate or could only read and write and only about 21% women were either higher secondary or graduate and above. In the urban sample a little over 50% were graduate and above and if higher secondary category was included the percentage rose to 75.4%. The illiterate category was there because of the construction workers.

Table No.3.5
Distribution of Women according to the type of Family

Area	Type of Family		Total
	Joint	Nuclear	
Rural	120 (48.0%)	130 (52.0%)	250
Urban	260 (52.0%)	240 (48.0%)	500
Total	380	370	750

The distribution of women according to type of family shows that in the rural areas 48% women were staying in joint families whereas 52% in the nuclear families. In the urban area the picture was just the opposite - 52% belonging to joint families and 48% to nuclear families. Rural migration to urban areas might be the reason for larger number of women belonging to the nuclear families in the rural areas. Similarly larger percentage of women belonging to joint family system in the urban area may be because working mothers' children need someone of the family to look after them when mothers have to go to distant places to work and spend longer hours outside their homes.

Occupational distribution of the women shows that in the rural areas all the women belonged to agricultural labour whereas in the urban areas their distribution was 187 in the industries, 108 school teachers, 105 government servants and 100 construction workers. Taking construction worker along-with the agricultural labour one gets a picture of the un-organised sector where the sample becomes a total of 350 women leaving 400 in the organised sector. Rural-urban samples show that in the lactating category there were 130 rural and 160 urban mothers, in the ^{first time} pregnant category their number was 16 and 92 respectively and in the non-lactating category their

number was 104 and 248 respectively. Out of total pregnant women 250 workers 102 were just married pregnant.

Table No.3.6

Length of Service of the Workers

Area	One yr. or less	1-2	2-3	3-4	4-5	Above 5 years	total
Rural	10 (4.0%)	16 (6.4%)	14 (5.6%)	10 (4.0%)	10 (4.0%)	190 (76.0%)	250
Urban	28 (5.6%)	27 (5.4%)	45 (9.0%)	55 (11.0%)	52 (10.4%)	293 (58.6%)	500
Total	38	43	59	65	62	483	750

Length of service of the rural women shows that more than 3/4th of them have been working for over 5 years and another 13.6% between 2 to 5 years and only a very small percentage 10.4% less than 2 years. In the urban area more than half i.e., 58.6% women have been working for over 5 years, 30% between 2 to 5 years and 11% less than 2 years. In the rural area out of 250 women 150 or 60% were not working before marriage whereas in the urban area only 160 or 32% were not working before marriage. In both rural and urban areas majority of the women started working five years or more after marriage, their percentage being 55% in the rural area and

78% in the urban area. Those who started working between 2 to 5 years after the marriage, their percentage was about 14% in the rural area and 13.5% in the urban area.

Table 3.7
Family income of Women

Family Income (Rs)

Area	500 or below	501-1000	1001-2000	20001-3000	& above	Total
Rural	90 (36.0%)	102 (40.8%)	40 (16.0%)	10 (4.0%)	8 (3.2%)	250
Urban	10 (2.0%)	90 (18.0%)	45 (9.0%)	135 (27.0%)	220 (44.0%)	500
Total	100	192	85	145	228	750

Distribution of women according to the family income shows that in the rural area more than 3/4th, i.e. 76.8% women belonged to income category of less than Rs.1000 per month. Those having more than Rs.3000 per month was only 3.2%, the remaining 20% being in the category of Rs.1001 to 3000 per month. In the urban area 44% were having monthly income over Rs.3000. The category of Rs.1000 and below formed 20% of the sample only and between Rs.1001-3000 the percentage was 36.0%. In the rural sample cent per cent sample was drawing salary in

the category of Rs. 1000 and below. In the urban sample this category consisted of 44% women workers only. Majority of the urban women that is, 52 per cent were earning between Rs.1001-2000. The remaining 4% belonged to category drawing monthly salary of Rs.2000 and above.

With regard to stability of the income cent per cent rural sample was having instability as they were not getting any fixed income. Their income fluctuated with the season and the type of employment they could fetch. In the urban sample about 77% women had fixed income, leaving 23% in the other category and this category covered mostly construction workers and a few industrial workers.

Table 3.8
Proportion of Women's Contribution
to Family Income

Area	whole	3/4th	1/2	1/3rd	1/4th	None	Total
Rural	246 (98.4%)	4 (1.6%)	-	-	-	-	250
Urban	335 (67.0%)	15 (3.2%)	74 (14.8%)	24 (4.8%)	37 (7.4%)	14 (2.8%)	500
Total	581	20	74	24	37	14	750

Contribution of women workers income to family income shows that in the rural area 98.4% women gave whole of their

salary towards family expenditure and the remaining 1.6% gave 3/4th of their salary. In the urban area those who gave the whole salary formed 67% of the sample. About 3% gave 3/4th of the income, 15% gave 1/2 of the income, 5% gave 1/3rd of the income 7% gave 1/4th of the income and remaining 3% did not contribute towards family income.

Table 3.9

Total Number of Members in the Family

Area	5 or less	6-9	10 & Above	Not Applicable	Total
Rural	85 (34.4%)	120 (48.0%)	39 (15.6%)	5 (2.0%)	250
Urban	300 (60.0%)	167 (33.4%)	32 (6.4%)	1 (.2%)	500
Total	386	287	71	6	750

The size of the family shows that families consisting of 10 or more members were forming 15.6% of the rural sample and 6.4% of the urban sample. Families having 5 or less members were forming 34.4% of the rural sample and 60% of the urban sample. Urban families therefore were much smaller in comparison to the rural families. In the rural sample 48% belonged to 6-9 members families whereas in the urban sample

33.4 per cent belonged to this category. Total number of family members if large could be an asset as far as looking after the children is concerned but it could be a liability if they are unproductive and depend on the women worker for their necessities of life.

To sum up, majority of the respondents (91%) are Hindus and 54 percent belong to forward castes and 40 percent to backward and low castes. Eightythree percent of the rural sample is from backward and low castes as against the 17.6 per cent of urban.

More than tow-third of the rural respondents were illiterate as against 20 percent of urban respondents. Fifty percent of the urban working mothers have graduate and above level education. Income level differences as between the rural and urban groups are wide. Those having monthly family income of less than Rs 1000 are 76.8 percent in rural as against 20 percent in urban areas. When we take the sample as a whole, 50 percent are having a monthly family income of more than Rs 2000 and 38.9 percent less than Rs 1000.

When we look into the age at marriage the rural urban differences are wider - 90 percent of rural respondents got married before 19 years of age (32 percent by 14 years) whereas 48.2 percent of urban women got married between 20 and 24 years of age. Fifty one percent of the total sample - 48 percent of rural and 52 percent of urban women reported having joint familie

CHAPTER IV

The nature of the job the women do, their work environment, help extended to them by their family and facilities offered to them by the employer, community and Government are often mentioned to be very important factors which enhance the capacity of the mother to successfully breast-feed her child. In view of this, an effort is made in this chapter to look into the extent of time spent by the women on the job, time taken to commute from home to work place and back, the distance they have to cover and the facilities they get to cope with the situation such as the help extended by the family and the facilities offered by the employer, the community and the Government. An effort is also made here to present the data occupation-wise which would give the extent of the problem faced by those working in organized and unorganized sectors.

These factors are significant from the point of view of Governments' policy formulation for two reasons. One is that the respondents under study are from weaker sections of society, mainly from the lower and lower middle income groups, who are the focus of many of the Government's policies. Secondly, all the above mentioned factors are amenable to change through Government's policy intervention.

Table No.4.1

Distribution of Respondents According to the Time of their Leaving for Work Place

Occupation	Time				No Answer	Total
	7.00 a.m., 8.00 a.m. & before	9.00 a.m.	10.00 a.m.	After 10 a.m.		
Industrial workers	13	80	84	3	6	197
Government servants	7	48	50	—	—	105
School teachers	17	58	28	—	5	105
Construction workers	1	70	28	1	—	100
Urban (Total)	38	256	190	4	11	500
Percentage	7.6	51.2	38.0	0.8	2.2	(100.00)
Agricultural Rural (Total)	17	133	59	25	16	250
Labourers Percentage	6.8	53.2	23.6	10.0	6.4	(100.00)
Grand Total	55	389	249	29	27	750
Percentage	7.3	51.9	33.2	3.9	3.6	0.1
						(100.00)

Table 4.1 gives occupation-wise distribution of respondents according to the time of their leaving home for work place.

It is evident from the above table that 51.9 percent of the total 750 respondents leave home to work place by 8.00 a.m. and 85.1 per cent by 9.00 a.m. There is marginal variation as between the urban and rural groups, 53.2 per cent of rural and 51.2 per cent of urban women leave by 8.00 a.m. However, there are variation within the various occupational groups. About 70 per cent of the teachers leave home by 8.00 a.m. whereas 52.4 per cent of Government servants and 49.2 percent of industrial workers leave by that time. 15.7 percent of the teachers leave home by 7.00 a.m. or before. It is to be noted that this is higher than those in unorganised, unskilled labour working in construction and agricultural occupations.

Table 4.2 gives the occupation-wise distribution of respondents according to the time of their returning home from work place.

Out of the total 750 respondents, 24.1 percent return home between 4-5 p.m; 36.3 percent between 5 and 6 p.m; 19 percent between 6 and 7 and only 3 perent after 7.00 p.m. Those who return home before 2.00 p.m. are only 2 percent. That

Table No. 4.2

Distribution of Respondents According to the time of their Returning home from Work Place

Time of Returning Home.

Occupation	Before 2.00 p.m.	2-3 p.m.	3-4 p.m.	4-5 p.m.	5-6 p.m.	6-7 p.m.	7 p.m. after 7 p.m.	Total
Industrial workers	-	-	-	4	110	68	5	187
Government servants	-	-	-	-	20	75	10	105
School Teachers	20	46	25	17	-	-	-	103
Construction workers	-	-	-	-	100	-	-	100
Urban (Total)	20	46	25	21	230	143	15	500
Percentage	4.0	9.2	5.0	4.2	46.0	28.6	3.0	100.0
Rural (Total)	18	20	10	160	42	-	-	250
Agricultural Labour Percentage	7.2	8.0	4.0	64.0	16.8	-	-	100.0
Grand Total	38	66	35	181	272	143	15	750
Percentage	5.1	8.8	4.7	24.1	36.3	19.0	2.0	100.0

is, majority of working women return home between 4 and 7 p.m. However, if we look into the rural, urban variations, 64 percent of the rural workers return between 4 and 5 p.m. whereas only 4.2 percent of urban workers return by that time. Fortysix percent of urban workers return between 5 and 6 p.m. If we exclude the unorganized sector construction workers we find that 49.9 percent of the organized sector women employees return home between 5 and 6 p.m. When we look into the occupation-wise variations, we find that around 60.0 percent of the industrial workers and cent percent of the construction workers return between 5 and 6 p.m. In the case of teachers 61.1 percent of them return before 3.p.m. (out of which 30.0 percent return before 2.00p.m.). The government servants return later than the rest of the groups. 71.4 percent of them return between 6 and 7 p.m. and 9.5 percent after 7.00 p.m.

The extent of time spent by working mothers outside home is given in table No.4.3. The time includes the time spent by them in commuting from home to work place and back in addition to the time spent on the job.

It is to be noted that 55.5 percent of the working mothers put in 9 hours of work away from home and only

Table No. 4.3

Distribution of Respondents According to their Total Working Hours Outside Home

Occupation	<u>Total Working Hours</u>					Total
	5 hrs. & Less	6 hrs.	7 hrs.	8 hrs.	9 hrs.	
Industrial Workers	2	-	4	26	155	187
Governments Servants	-	-	-	11	94	105
School teachers	4	98	6	-	-	108
Construction Workers	-	-	-	56	44	100
Urban (Total)	6	98	10	93	293	500
Percentage	1.2	19.6	2.0	18.6	58.6	100.0
Rural Agricultu- ral Workers (Total)	52	12	18	45	123	250
Percentage	20.8	4.8	7.2	18.0	49.2	100.0
Grand Total	58	110	26	138	416	750
Percentage	7.7	14.7	3.7	18.4	55.5	100.0

7.7 percent put in 5 hours or less work. As compared to 58.6 percent of urban working mothers, only 49.2 percent of rural women put in 9 hours of work. In the urban organized sector only 6 respondents or 1.2 percent of the urban mothers reported

that their total working hours away from home are 5 hours or less. This is considerably smaller than the 20.8 percent of the rural respondents who reported working 5 hours or less outside home. This may be due to the part time nature of the agricultural sector. If we look into the occupation wise variations it is significant to note that 90.8 percent of the teachers reported working for 6 hours. Whereas about 82.9 percent or 155 of industrial workers and about 90.0 percent government servants reported working for 9 hours 56.0 percent of construction workers are working for 8 hours and 44.0 percent are working for 9 hours outside home.

Table 4.4 gives the occupation-wise distribution of respondents according to the distance from home to their work place. Out of the total 750 respondents 37.2 percent live less than two kilometers away from their work place. Out of these 82.1 percent are agricultural workers. 13.3 percent (all the 100 construction workers) of the respondents live at the place of work. 14.5 percent of the respondents live at the place of work. 14.5 percent of the respondents reported that they are staying more than fifteen kilometres away from their work place.

If we look at the rural, urban differences, we find that 92.0 percent of the rural working mothers have to commute a

Table No. 4.4

Distribution of Respondents According to Distance from
their Home to Work Place

Occupation	Less than 2 km.	Distance in (Kms.)						Living at site	No. answer	Total
		2-5	5-10	10-15	Above 15	Living at site	No. answer			
Industrial Workers	15	37	55	35	35	-	10	187		
Government Servants	7	7	19	18	54	-	1	105		
School Teachers	27	23	23	13	20	-	2	108		
Construction Workers	-	-	-	-	-	100	-	100		
Urban(Total)	49	67	97	66	109	100	12	500		
Percentage	9.8	13.4	19.4	13.2	21.8	20.0	2.4	100.0		
Agricultural Labour Rural (Total)	230	15	1	-	-	-	4	250		
Percentage	92.0	6.0	0.4				1.6	100.0		
Grand Total	279	82	98	66	109	100	16	750		
Percentage	37.2	10.9	13.1	8.8	14.5	13.4	2.1	100.0		

distance of less than two kilometres from work place as compared to the 9.8 percent of urban working women who commute the same distance. Out of the 500 urban working mothers 21.8 percent

commute more than fifteen kilometres from their work place. It is to be noted that there is not even one respondent in this category among agricultural labourers and construction workers who constitute the unorganized sector. Thirty five percent of urban working mothers in the organized sector, (i.e. industrial workers, government servants and school teachers) stated that they commute more than 10 kilometres from home to work place. Occupation-wise analysis shows that larger percentage of government servants as compared to other categories in the organized sector, i.e. 51.4 percent, reside more than fifteen kilometres away from their work place. This probably explains the long working hours mentioned by them. 68.6 percent of this category stay more than ten kilometres away from home as compared to the 31.5 percent of school teachers and 37.4 per cent of industrial workers. Out of the 49 respondents belonging to the organized sector who stated that they stay less than two kilometres away from work place, 27 or 55.1 percent belong to the category of teachers.

The following table 4.5 gives the occupation-wise distribution of respondents according to the extent of time taken to reach work place. Out of the total 750 respondents 32.5 percent reach in 15 minutes or less time and another

Table No.4.5

Distribution of Respondents According to the Extent
of Time Taken to Reach Work Place

Occupation	Time (in minutes)					Total
	15min. & less	16-30	31-45	46-60	More than one hour	
Industrial Workers	50	76	28	22	11	187
Government Servants	10	24	14	35	22	105
School Teachers	39	32	10	16	11	108
Construction Workers	100	-	-	-	-	100
Urban (Total)	199	132	52	73	44	500
Percentage	39.8	26.4	10.4	14.6	8.8	100.0
Agricultural Labour						
Rural (Total)	45	189	16	-	-	250
Percentage	18.0	75.6	6.4	-	-	100.0
Grand Total	244	321	68	73	44	750
Percentage	32.5	42.8	9.1	9.7	5.9	100.0

42.8 percent stated that they take 16 to 30 minutes to reach work place. That is 75.3 percent of the total respondents

Table No.4.5

Distribution of Respondents According to the Extent
of Time Taken to Reach Work Place

Time(in minutes)

Occupation	15min. & less	16-30	31-45	46-60	More than one hour	Total
Industrial Workers	50	76	28	22	11	187
Government Servants	10	24	14	35	22	105
School Teachers	39	32	10	16	11	106
Construction Workers	100	-	-	-	-	100
Urban (Total)	199	132	52	73	44	500
Percentage	39.8	26.4	10.4	14.6	8.8	100.0
Agricultural Labour						
Rural (Total)	45	189	16	-	-	250
Percentage	18.0	75.6	6.4	-	-	100.0
Grand Total	244	321	68	73	44	750
Percentage	32.5	42.8	9.1	9.7	5.9	100.0

42.8 percent stated that they take 16 to 30 minutes to reach work place. That is 75.3 percent of the total respondents

reach work place in half an hour or less. The percentage will be misleading if we do not take into account, the hundred construction workers who stay at site. All those who stated that they take more than an hour belong to the urban organised sector. 50 percent of them are government servants. It is to be noted that this category also constitutes 50 percent of those who stated that they stay more than 15 kilometres away from work place. 75.6 percent of rural respondents take 16 to 30 minutes to reach work place. If we look into the occupational distribution out of the 99 respondents around 40 percent (excluding construction workers) of those who take 15 minutes or less are school teachers, 50.5 percent are industrial workers and the rest are government servants. 65.7 percent of the teachers, 68.9 percent of the industrial workers and 32.4 percent of government servants take half an hour or less to reach work place. It is significant to note that 54.3 percent of government servants take more than 45 minutes to reach work place.

Table No.4.6 gives the occupation-wise distribution of respondents according to the mode of conveyance used by them to reach work place. Of the total 750 respondents 394 or 52.5 percent (248 our of 250 rural and 100 construction workers and 46 from the rest of the categories) walk to the work place.

Around 5.0 percent only use private vehicles either hired or own. Out of the 400 (excluding construction workers from urban sector) organized sector women employees, 299 or 74.8 percent depend on public transport (more specifically bus) to reach their work place. 84.8 percent of the government servants, 74.8 percent of the industrial workers and 64.8 percent of the school teachers use bus service to reach work place. None of the respondents reported using train service. The overwhelming dependence of the organized sector on the public transportation system is understandable in view of the long distances, the expensive nature of hired or own transport and the lower levels of income of the respondents. This is an important factor to be kept in mind in the formulation of policy regarding facilities to be provided to the group to enable them breast feed the child.

Table 4.7 gives the distribution of respondents according to their occupation and the amount of daily expenditure incurred by them to reach work place. The construction workers do not incur any expenditure as mostly all of them live at work site. As far agricultural labour is concerned 248 of the 250 go by walking to the work place. Therefore, it is to be noted that women workers in the organised sector only incur expenditure on conveyance. Of

Table No. 4.6

Distribution of Respondents According to the Mode of
of Conveyance used to Reach Work Place

Occupation	On foot	Private vehicle		Public vehicle		Any	Total
		Own	Hired	Bus	other		
Industrial Workers	19	4	16	140	8	187	
Government Servants	10	2	-	89	4	105	
School Teachers	17	-	16	70	5	108	
Construction Workers	100	-	-	-	-	100	
Urban(Total)	146	6	32	299	17	500	
Percentage	29.2	1.2	6.4	59.8	3.4	(100.0)	
Agricultural Labour Rural (Total)	248	-	-	2	-	250	
Percentage	99.2	-	-	0.8	-	(100.0)	
Grand Total	394	6	32	301	17	750	
Percentage	52.5	0.8	4.3	40.1	2.3	(100.0)	

Table No. 4.7

Distribution of Respondents According to the Expenditure incurred per day on Conveyance for purpose of work

Occupation	Expenditure						Total
	Rs. 1 & less*	Rs. 1-2	Rs. 2-3	Rs. 3-4	Above Rs. 4	Not applicable	
Industrial Workers	95	44	20	3	6	19	187
Government Servants	22	50	14	6	3	10	105
School Teachers	24	32	20	6	10	16	108
Construction Workers	-	-	-	-	-	100	100
(Total) Urban	141	126	54	15	19	145	500
Percentage	28.2	25.2	10.8	3.0	3.8	29.0	100.0
Agricultural Labourers (Rural)	2	-	-	-	-	248	250
Percentage	0.8	-	-	-	-	99.2	100.0
Grand Total	143	126	54	15	19	393	750
Percentage	19.1	16.8	7.2	2.0	2.5	52.4	100.0

* Some of those who reported that they mostly go by walking, do incur some expenditure on other modes of transport like cycle Rikshaw.

the 400 women in this sector 141 or 35.3 percent incur on an average one Rupee or less per day on transport. 34.5 percent incur more than one Rupee but upto Rs.2, 13.5 percent incur more than two rupees but upto 3, 8.5 percent spend more than three rupees per day on conveyance. Occupation-wise distribution reveals that 68.9 percent of industrial workers 68.5 percent of government servants and 52.8 percent of school teachers incur upto two rupees per day to reach work place. 50 percent of industrial workers spend one rupee or less only. 24.1 percent of school teachers and 19.5 percent of government servants spend upto Rs 4 per day to reach work place. It is to be noted that the expenditure is mostly on bus transport.

In the context of the above constraints of time distances, conveyance etc., we look into the occupation-wise distribution of respondents who are taking and not taking their child to work place. It is evident from Table No.4.8 that 188 or 25.1 per cent of the 750 respondents are taking their child to work place. Out of this 188, 41 of the employees in the organized sector, that too industrial workers only are taking their child to work place. 58.8 percent of the rural and 56.6 percent of the urban working mothers are not taking their child to work place. None of the government servants and school teachers are taking their child to work place.

Table No.4.8

Distribution of Respondents taking and not taking
their child to work place

Occupation	Taking the child to work place	Not taking the child to work place	Not applicable	Total
Industrial Workers	41	86	60	187
Government Servants	-	95	10	105
School teachers	-	85	23	108
Construction Workers	69	17	14	100
Urban (Total)	110	183	107	500
Percentage	31.2	58.8	21.4	100.0
Agricultural Labour Rural(Total)	78	147	25	250
Percentage	31.2	58.8	10.0	100.0
Grand Total	188	430	132	750
Percentage	25.1	57.3	17.6	100.0

Regarding the arrangements made by the employer at the work place to breast feed the child 3.7 percent of the 750 respondents 4.9 stated that they have creche facility at work place. This facility is made available to industrial and construction workers only. Neither government servants, nor school teachers, nor agricultural labour in the sample replied that their employer provides creche facility at work place. Permission to feed the child during working hours was reported by industrial and construction working women and agricultural labour. They account for 23.2 percent of the total respondents. None of the respondents reported that their employer gives permission to go home to feed the child. It is to be noted that 26.9 percent of the respondents only reported that some arrangement is provided by the employer to breast feed the child at work place.

Table 4.10 gives the occupation wise distribution of respondents who are not taking their child to work place according to the type of arrangement made by them for child care during working hours 44.8 percent of the total respondent stated that family members, that is, parents, parent-in-laws, husband, older siblings etc. look after the child in their absence. Only 12.0 percent reported creche facility.

Table No.4.9

Distribution of Respondents according to the facilities provided by the employer at the work place to breast feed the child

Occupation	Creche facility to feed during working hours	Permission to feed during working hours	Not applicable	Total
Industrial Workers	14	27	146	187
Government Servants	-	-	105	105
School Teachers	-	-	108	108
Construction Workers	14	69	17	100
Urban(Total)	28	96	376	500
Percentage	5.6	19.2	75.2	100.0
Agricultural Labour Rural (Total)	-	78	172	250
Percentage	-	31.2	68.8	100.0
Grand Total	28	174	548	750
Percentage	3.7	23.2	73.1	100.0

Table No.4.10

Distribution of Respondents not taking their Child to Work Place and according to the type of arrangements made for child care during working time

Occupation	Family members*	Creche	Not applicable**	Total
Industrial Workers	55	31	101	187
Government Servents	81	14	10	105
School Teachers	62	23	23	108
Construction Workers	-	17	83	100
Urban (Total)	198	85	217	500
Percentage	39.6	17.0	43.4	100.0
Agricultural Workers				
Rural (Total)	142	5	103	250
Percentage	56.8	2.0	41.2	100.0
Grand Total	340	90	320	750
Percentage	45.3	12.0	42.7	100.0

* Family members includes parents, parent-in-laws, husband and other siblings.

** Includes those who are first time pregnant and those who are taking the child to work site.

But if we take into account only those 430 respondents who are not taking their child to work place i.e. excluding, not applicable category, (Table 4.8), 340 or 79.0 percent stated that family members take care of the child and around 21 percent mentioned creche facility. The dependence of the category of mothers in government service on family members is considerable, i.e. 77.1 percent and is more than that of other categories.

The respondents were asked to mention the reasons for not taking their child to work place. The multiple responses given by them are given in table 4.11. This gives us an indication of the problems faced by the working mothers in breast feeding their child. The most frequently mentioned reason for not taking the child to work place is that taking the child interferes with their work. This is mentioned more by agricultural 116 out of 250 respondents as against 113 of the 500 urban respondents.

This is followed by the employer's objection - 163 responses. However, in this case, it is the respondents in the urban organized sector who mentioned it more frequently than others - 124 responses against 44 of agricultural labour (none from construction workers). The third reason mentioned is that the child suffers in view of lack of facility at work place -

Table No. 4.11.

Distribution of Respondents According to the Reasons given for not taking the child to work place

Occupation	Feel shy	Inconvenient	Child is too young at work	Interfers with other work	Employers' objection	No facility	No confidence	Others
Industrial Workers	4	28	16	36	65	46	4	32
Government Servants	3	23	9	24	21	27	4	2
School Teachers	3	22	22	44	38	15	4	7
Construction Workers	-	-	7	9	-	2	-	-
Urban (Total)	10	73	54	113	124	90	12	41
Agricultural Labour Rural (Total)	2	10	21	116	44	17	-	3
Grand Total	10	83	75	229	168	107	12	41

out of total of 107 under this category 90 have been mentioned by urban women (46 industrial, 27 government servants and 15 school teachers etc.). General statements like inconvenient 83 child is too young have been made by the mothers. Those who mentioned 'feel shy' 'no confidence' account for only 22 responses. Thus lack of facilities at work place, work environment, employer's objections and their own feeling of not being able to do justice to the job on hand come in the way of taking the child to work place to breast feed.

Apart from the facilities offered at the work place, employees, especially in the organized sector do provide facilities like maternity leave/other leave to enable the mother to take care of the child in infancy. Table 4.12 gives the occupation-wise distribution of respondents who had been

Table No.4.12

Occupation-wise Distribution of Respondents who have been Granted Maternity Leave

Occupation	Yes	No/ Not Applicable	Total
Industrial Workers	142	45	187
Government Servants	97	8	105
School Teachers	104	4	108
Total	343	57	400
Percentages	68.6	31.4	100.0

granted maternity leave or not. Out of the total 750 respondents only 343 or 45.7 percent stated that they had been granted maternity leave. In the organized sector consisting of industrial workers, government servants, and school teachers only 343 of the 400 availed maternity leave. Some industrial workers reported that they do not enjoy the maternity leave benefit at all. It is to be noted that none of the construction and agricultural labour enjoy this facility from the employer. Occupation-wise less percentage of industrial workers as compared to school teachers and government servants enjoy this facility.

Table No.4.13

Distribution of Respondents according to their Responses
regarding adequacy/inadequacy of maternity
leave

Occupation	Adequate	Inadequate	Total availing Maternity leave
Industrial Workers	55	87	142
Government Servants	35	61	96
School Teachers	63	41	104
Construction Workers	-	-	-
Urban (Total)	153	189	342
Percentage	44.8	55.2	100.0

When the respondents who availed the maternity leave are asked about the adequacy of the maternity leave

44.8 percent of the urban working mothers replied in the affirmative and 55.2 percent in the negative. It should be noted that agricultural labour and construction workers who constitute 350 in number and belong to the unorganised sector do not enjoy any maternity benefits.

The percentage of industrial workers and government servants who mentioned the maternity leave sanctioned to be inadequate are more than the school teachers - 61.3, 53.5 and 39.4 respectively. This may be due to the fact that the school teachers are able to combine their maternity leave with school vacations etc.

Those respondents who mentioned maternity leave to be inadequate have been asked to five suggestions as to make the maternity leave provision adequate. Their answers have been given occupation-wise in Table 4.14. It is significant to note that 203 of the 227 respondents i.e. 91.2 percent suggested that there should be provision to grant additional leave with either full or half pay. Only 8.8 percent of their suggested additional leave without pay.

Table No.4.14

Distribution of Respondents according to their suggestions to make the maternity leave provision adequate

Occupation	Additional leave with full/half pay	Additional leave with- out pay	Total
Industrial Workers	110	7	117
Percentage	93.9	6.1	100.0
Government Servants	63	4	67
Percentage	94.2	5.8	100.0
School Teachers	31	12	43
Percentage	72.1	27.9	100.0
Total	203	24	227
Percentage	91.2	8.8	100.0

Table 4.15 gives the occupation-wise distribution of respondents who have extended their maternity leave beyond the stipulated twelve weeks.

Out of the 343 working women in the organized sector who availed maternity leave 104 or 30.3 percent have extended leave and the rest have not. The percentage of government servants extending leave is more - 42.3 percent as compared to

Table No. 4.15

Distribution of Respondents According to their
extending maternity leave beyond 12 weeks

Occupation	Extended maternity leave	Not extended maternity leave	Total availing maternity leave
Industrial Workers	48*	94	142
Percentage	33.9	66.1	100.0
Government Servants	41**	56	97
Percentage	42.3	58.7	100.0
School Teachers	15***	89	104
Percentage	14.4	85.6	100.0
Total	104	239	343
Percentage	30.3	69.7	100.0

* Industrial workers: extended leave upto one month - 30
more than one month but less than six
months - 18

**Government Servants: extended leave upto one month - 22
more than a month but less than six months 1

***School Teachers: extended leave upto one month 9
more than a month and less than
six months 6

the 33.9 and 14.4 percent of industrial workers and school teachers respectively.

Table No.4.16 presents the occupation-wise distribution of respondents according to the reasons given by them for extending the maternity leave. Out of the 104 working mothers who extended their leave, 36 or 34.6 percent stated that they had extended the leave as the child was too small and 29.8 percent had no one to look after the child at home. Only 13 respondents or 12.5 percent of those who extended leave stated that they did so as it facilitate breast feeding. The rest i.e. 22.1 percent extended leave as either the child or mother was sick. Occupation-wise, 47.9 percent of industrial workers and 40.0 percent of school teachers extended as the child was too small whereas 51.2 percent of government servants gave the reason that there was no one at home to look after the child.

Table 4.17 gives the distribution of respondents according to the type of problems faced by them from the employer after expiry of maternity leave. It is evident that 23 respondents or 20.2 percent of the 104 who extended the maternity leave had to face problem from the employer. In the case of industrial workers the problem was by way of not

Table No.4.16

Distribution of Respondents according to the reasons given for extending maternity leave

Occupation	Child was too small child/ mother	Illness of the body to look after the child at home	No body to look after the child at home	To facilitate breast feeding	Total who extended maternity leave
Industrial Workers	23	13	6	6	48
Percentage	47.9	27.1	12.5	12.5	100.0
Government Servants	7	7	21	6	41
Percentage	17.1	17.1	51.2	14.6	100.0
School Teachers	6	3	4	2	15
Percentage	40.0	20.0	26.7	13.3	100.0
Total	36	23	31	13	104
Percentage	34.6	22.1	29.8	12.5	100.0

Table No.4.17

Distribution of Respondents according to the type of problems faced by them from the employer after expiry of Maternity Leave

Occupation	Type of Problem				
	Leave was sanctioned without pay	Bonus not paid	Extra hours of work	Total who faced problems	Total who extended leave
Industrial Workers	1	10		11	48
Government Servants	3	-	4	7	41
School Teachers	2	-	1	3	15
Total	6	10	5	21	104

Figures in brackets are percentages.

getting the bonus whereas in case of school teachers it is sanctioning of leave without pay or extra hours of work so as to finish the pending work. None of them reported that their increment was stopped.

To sum up, working women spend minimum of eight hours time outside their home. This includes commuting time from residence to workplace and back. Urban women spend more time than rural women due to distances involved in commuting from home to work place and back. When we look into the occupational categories, women working in organized sector spend more time outside home. Within the organized sector also, women working in Government offices and industrial establishments spend more time outside their home. This is partly due to the fact that location of work places are farther away from their residences. For example, more than fifty percent of the Government servants commute by bus by more than fifteen kilometres per day and take one and a half to two hours time for this purpose. Very few working women reported having own transport facilities.

This may be one of the main reasons coming in the way of women taking their children to work place for breast feeding. Only 25 percent of the sample respondents stated that they take their child to work place. This is mostly true of agricultural workers and construction workers. In the

organized sector only 10.2 percent of the women take their child to work place and all of them belong to the category of industrial workers. They also reported that very often their employer objects to it. None of the teachers and government servants take their child to work place. Regarding the facilities provided by the employer at the work place to breast feed the child only 5.6 percent of women reported that they get creche facilities. They are : construction workers 14.0 percent) and industrial workers (7.4 percent). None of the women reported that their employer permits them to go home to breast feed their child.

Out of those who are not taking their children to work place, 79 percent depended on the support extended by members of the family such as parents, parents-in-law, older siblings etc. to look after the child in their absence. This is more so in case of government servants. Only twenty one percent of women who are not taking their child to work place depends on creches to look after their child in their absence. The reasons frequently mentioned was that it will interfere in their work.

Regarding maternity leave facility, it is not available to agricultural labour and construction workers. In the

organized sector also some industrial workers mentioned that they do not get maternity leave but got only leave without pay. Thirty percent of those who availed maternity leave extended the leave period beyond the stipulated twelve weeks. Higher percentage of them are Government employees as compared to industrial workers and school teachers. Main reason for extending the leave is that the child was too small and there was nobody to look after the child followed by that it facilitates breast feeding.

Regarding adequacy of maternity leave, majority (55.2 percent) mentioned that the leave granted to them is not sufficient to fully breast feed the child. Occupation-wise we find that this is more frequently mentioned by government servants, followed by industrial workers as compared to school teachers. Women in the unorganized sector in general and agricultural labour in particular are unable even to comprehend the idea of maternity leave.

Ninety one percent of those who mentioned inadequacy of maternity leave suggested that additional leave with either full or half pay should be provided to facilitate full breast feeding of the child.

The problems faced by working women on extending maternity leave were by way of stoppage of bonus in the case of industrial

workers and extra hours of work to complete pending work in the case of school teachers. However, these constitute a small percentage of the women working in the organised sector.

CHAPTER V

ATTITUDINAL ORIENTATION

The declining trend of breast feeding and changing breast feeding and weaning practices in urban areas and its influence on rural population has attracted health policies of many governments in Asian region. The cultural practices of the family and the community^{to} which the mother belongs, her exposure to mass-media, her level of education the type of activities she does inside and outside the house and the amount of time she spends in this regard are some important factors that appear to be associated with the declining trend of breast feeding and early weaning of the child . The previous chapter dealt with the problems faced by women in the context of their work situation and its bearing on their ability to breast feed the child. The present chapter deals with the attitudes of the working mothers towards breast feeding and weaning practices in the context of fast changing socio-economic situation and cultural modes and the influence of their exposure to education and mass media. The intentions and initiatives taken by the mothers are also studied so as to make an assessment of the problems faced by them and suggest appropriate measures to solve the same.

Age, Education and Income were some of the important variables taken to find out if the breast feeding of the child was affected because of mother's involvement in work inside and outside the house. A large number of statements were put forward before the working mothers to find out their opinion as to why they preferred to breast feed their children. However, this question has not been put to the first time pregnant women who are 108 in number. As the number of 'no answers' are very few in number they have been ignored for the purpose of analysis. It is to be mentioned here that the responses are multiple and no priorities are assigned to the reasons given by them.

The following statement gives the reasons for the various statements put forward to the women. It is evident from the statement that mothers are more concerned about the welfare of the child. The first five statements which pertain to the health and well being of the child elicited the maximum number of responses and they are followed by the statements which are concerned with their own economic and emotional aspects. It is, however, to be noted that there are only sixtyseven responses, i.e. the lowest number of responses to the statement that breast feeding delays pregnancy. In view of the fact

<u>Statement</u>	<u>Number of responses of women</u>
1. It makes the child strong	408
2. It protects the child from many diseases	373
3. There is no parallel to breast milk	308
4. It is natural food for the child	306
5. It is hygenic and safe	286
6. It is easy and convenient	248
7. It costs nothing	182
8. It strengthens the bond with the child	179
9. It is my moral duty	148
10. It is the child's right	146
11. It provides opportunity to relax	115
12. I enjoy it	71
13. It delays pregnancy	67

that recent research points out the significant role played by full breast feeding in preventing pregnancy. Government's role in educating women through its health policy and personnel assumes greater importance.

Table 5.1 gives the age-wise distribution of women who responded to various statements regarding their reasons to breast feed their children.

Table No.5.1

Age-wise distribution of responses of women who preferred to Breast Feed because of the following reasons (Total and Percentages)

Responses	<u>Age</u>					Total
	Upto 20 yrs.	20-25 yrs.	26-30 yrs.	31-35 yrs.	36 & above yrs.	
It is easy and convenient	15 (6.0)	69 (27.8)	97 (39.1)	51 (20.6)	16 (6.5)	248 (100.0)
It is my moral duty	1 (0.7)	18 (12.2)	77 (52.0)	41 (27.7)	11 (7.4)	148 (100.0)
I enjoy it	1 (1.4)	14 (19.7)	35 (49.3)	18 (25.4)	3 (5.4)	71 (100.0)
It provides opportunity to relax	5 (4.3)	43 (37.4)	38 (33.0)	23 (20.0)	6 (5.2)	115 (100.0)
It strengthens my bond with the child	0 (.0)	31 (17.3)	93 (52.0)	40 (22.3)	15 (8.4)	179 (100.0)
It is natural food for the child	3 (1.0)	51 (16.7)	169 (56.2)	71 (23.2)	12 (3.9)	306 (100.0)
It Costs nothing	8 (4.4)	45 (24.7)	82 (45.1)	37 (20.3)	10 (5.5)	182 (100.0)
It is hygienic and safe	5 (1.7)	59 (20.6)	147 (51.4)	61 (21.3)	14 (4.9)	286 (100.0)
There is no parallel to breast milk	7 (2.3)	76 (24.7)	136 (44.2)	66 (21.4)	23 (7.5)	308 (100.0)
It makes the child strong	10 (2.5)	95 (23.3)	188 (46.1)	88 (21.6)	27 (6.6)	408 (100.0)
It is the child's right.	1 (0.7)	26 (17.8)	70 (47.9)	38 (26.0)	11 (7.5)	146 (100.0)
It protects the child from many diseases	7 (1.9)	83 (22.2)	173 (46.4)	92 (22.0)	28 (7.5)	373 (100.0)
It delays Pregnancy	1 (1.5)	24 (35.8)	28 (41.8)	13 (19.4)	1 (1.5)	67 (100.0)

About 408 women preferred breast feeding because it makes child strong. The distribution of these women in different categories of age was 46.1 per cent in 26-30 years, 23.3 percent in 21-25 years, 21.6 percent in 31-35 years, 6.6 percent in 36 and above and 2.5 percent below 20 years. Taken together with this is those who preferred breast feeding because it protects child from many diseases. About 373 women were in this category and their distribution was 46.4 percent in 26-30 years, 20 percent each in 21-25 years and 31-35 years, 8 percent in 36 and above and 2 percent below 20 years of age.

About 373 women preferred breast feeding because it protects the child from many diseases. The distribution of responses from women in different age groups are - 46.4 percent in 26 to 30 years, 22.2 percent in 21 to 25 , 22 percent in 31 to 35 years, 7.5 percent in 36 and above age group and only 1.9 percent in 20 years and below age group.

Out of 308 women who preferred breast feeding because there is no parallel to breast milk only 2.3 percent were in the 20 years and below age group and 7.5 percent in the 35 and above group. The rest of the women belonged to the age group of 21 to 35 years. Here also majority of the women, 44.2 percent are that is/in the age category of 26-30 years of age.

There were 306 women who preferred breast feeding because it is natural food for the child. Out of these 306 women 55.2 percent belonged to age group of 26-30 years and another 23.2 percent to age group of 31-35 years, 17.3 percent to age group of 21-25 years and 8.4 percent to age group of 36 and above. Only one percent was in the twenty years and below age group.

Only 286 women preferred breast feeding because it is hygienic and safe. Out of these a little over half (51.4%) belonged to the age group of 26 to 30 years, about 21 percent each to 21-25 years and 31-35 years, 5 percent to 36 and above and about 2 percent to below 20 years of age.

Out of 750 working mothers 248 preferred breast feeding because it is easy and convenient. Out of these 248 women about 39 percent belonged to the age group of 26 to 30 years, 28 percent in 21 to 25 years and about 21 percent to the age group of 31 to 35 years. Around 6 percent each belonged to 20 years and below and 36 years and above age groups.

About 182 women preferred breast feeding because it did not put any monetary strain on them. It was perceived as free resource. Out of these 182 women 45 percent belonged to the age group of 26-30 years, 25 percent to 21-25 years,

20.3 percent to 31-35 years and 5.5 percent and 4.4 percent respectively to 36 years and above and upto 20 years of age.

Out of 179 women preferred breast feeding because it strengthens their bond with the child. More than half of the women (52%) were in the age group of 26-30 years, 22.3 percent in the age group of 31-35 years, 17.3 percent between 21 and 25 years, a little over 8 percent in the age group of 36 and above and none in the 20 years and below group.

Out of total of 148 working mothers who preferred breast feeding because it is moral to do so about 80 percent belonged to the age group 26 to 35 years. About 12 percent were in the 21 to 25 years, 7 percent 36 years and above and only one percent in the 20 years and below group.

About 146 women preferred breast feeding because it is child's right. Out of these 146 women 48 percent belonged to 26-30 years, 26 percent to 31-35 years, 18 percent to 21-25 years, 8 percent to 36 and above and one percent below 20 years of age.

About 115 women preferred breast feeding because it provides opportunity to relax. The younger and the older percentages for this were very small - a little over 4 percent

upto 20 years and 5 percent in the age group of 36 and above. About 20 percent belonged to the age group of 31-35 years and the remaining majority, a little over 70 percent, belonged to the age group of 21 to 30 years. Out of the last category, 33 percent belonged to 26 to 30 years and 37 percent to 21 to 25 years age group.

Only 71 women preferred breast feeding because they enjoyed it. About 75 percent of them belonged to the age group of 26 to 35 years. Another 21 percent were below 25 years and 4 percent were in the age category of 36 and above.

Only 67 women preferred breast feeding because it delays pregnancy. Out of these 67 women 42 percent belonged to 26-30 years, 36 percent to 21-25 years about 20 percent to 31-35 years and 1.5 percent each to 36 and above and below 20 years of age.

Age-wise analysis of the responses from women regarding the reasons for breast feeding their children shows that the 26 to 30 years age group's responses are the highest in respect of all the statements except in case of the statement that breast feeding provides opportunity to relax. Here 21 to 25 years age group's is only slightly higher than that of the 26 to 30 years age group. The statement that breast feeding delays pregnancy, although ranking lowest in the total number

of responses, elicited the maximum response (77%) from the 21 to 30 years age group. This gives the knowledge and awareness of the group the importance of breast feeding to family planning and spacing aspects.

Table 5.2 gives the education-wise distribution of responses from women regarding reasons for breast feeding the child.

There were 408 women who preferred breast feeding because it makes the child strong. Out of these 408 responses 36 percent were from graduates and above, 34 percent illiterate or with no formal education, 21.6 percent with higher secondary education, 6.6 percent with middle school education and only 1.7 percent with primary school education.

About 373 women who preferred breast feeding because it protects the child from many diseases. There were 40.5 percent who were graduates and above, 29 percent illiterate or with no formal education, 22.5 percent with higher secondary, 5.6 percent with middle and 2.4 percent with primary school education.

Out of 308 who preferred breast feeding because there is no parallel to breast mil, 38.3 percent were graduates and above 32.5 percent illiterate or with no formal education, 20.5 percent with higher secondary education, 6.8 percent with middle school education and 1.9 percent with primary school education.

Table No.5.2

Education-wise distribution of responses of women who preferred to breast-feed because of the following reasons
(Total and Percentages)

Reasons	<u>Education</u>					Total
	Illeterate/ No formal Education	Primary	Middle	Hr. Secondary	Graduate & above	
It is easy and convenient	122 (49.2)	2 (.8)	15 (.6)	40 (16.1)	69 (27.8)	248 (100.0)
It is my moral duty	8 (5.4)	0 (.0)	4 (2.7)	51 (34.5)	85 (57.4)	148 (100.0)
I enjoy it	14 (19.7)	0 (.0)	2 (2.8)	21 (29.6)	34 (27.9)	71 (100.0)
It provides opportunity to relax	63 (54.8)	3 (2.6)	6 (5.2)	17 (14.8)	26 (22.6)	115 (100.0)
It strengthens my bond with the child.	28 (15.6)	0 (.0)	8 (4.5)	39 (21.8)	104 (58.1)	179 (100.0)
It delays pregnancy	16 (23.9)	1 (1.5)	6 (9.0)	13 (19.3)	31 (46.3)	67 (100.0)
It is natural food for the child	52 (17.0)	3 (1.0)	13 (4.2)	80 (26.1)	158 (51.6)	306 (100.0)
It costs nothing	86 (47.3)	4 (2.2)	14 (7.7)	31 (17.0)	47 (25.8)	182 (100.0)
It is hygienic and safe	60 (21.0)	4 (1.4)	16 (5.6)	52 (21.7)	144 (50.3)	286 (100.0)
There is no parallel to breast milk	100 (32.5)	6 (1.9)	21 (6.8)	63 (20.5)	118 (38.3)	308 (100.0)
It makes the child strong	139 (34.1)	7 (1.7)	27 (6.6)	88 (21.6)	147 (36.0)	408 (100.0)
It is the child right	24 (16.4)	1 (.7)	5 (3.4)	45 (30.8)	71 (48.6)	146 (100.0)
It protects the child from many diseases	108 (29.0)	9 (2.4)	21 (5.6)	84 (22.5)	151 (40.5)	373 (100.0)

Out of 306 who preferred breast feeding because it is natural food for the child, 51.6 percent were graduates and above, 26.1 percent higher secondary, 17 percent illiterate or with no formal education, 4.2 percent with middle school education and 1 percent with primary school education.

To the statement that it is hygenic and safe, there are 286 responses. More than 50 percent of the responses are from the category of graduates and above, 22 percent higher secondary and 21 percent from the illiterate group. Around 7 percent from the middle and primary level educated groups.

Education-wise analysis of the mothers show that out 248 mothers who preferred breast feeding because it is easy and convenient, a little less than half (49.2%) were either illiterate or had no formal education. About 28 percent had graduation and above, 16 percent higher education and remaining (a little less than 2%) were either primary or middle school education.

About 182 who preferred breast feeding because mother's milk cost nothing, 25.8 percent were graduates and above 17 percent higher secondary, 47.3 percent illiterate or with no formal education, 7.7 percent with middle school education and 2.2 percent with primary school education.

About 179 who preferred breast feeding because it strengthens the bond of mother with the child, 50.1 percent were graduates and above, 21.8 percent had higher secondary, 15.6 percent were illiterate or with no formal education and 4.5 percent were with middle school education.

About 148 who preferred because it is moral duty, 57.4 percent were graduate and above, 34.5 percent higher secondary, 2.7 percent middle and 5.4 percent illiterate or with no formal education. There was no one with primary education background.

Only 146 women preferred breast feeding because it is the child's right. There were 48.6 percent of graduates and above in this category. About 31 percent were higher secondary, 16 percent illiterate, 3 percent with middle school education and about 1 percent with primary school education.

Out of 115 who preferred breast feeding because they could find time to relax, 55 percent were either illiterate or had no formal education, 22.6 percent graduates and above, 14.8 percent had higher secondary, 5.2 percent middle and 2.6 percent primary education.

Only 71 who preferred because they enjoyed it 48 percent were graduate and above, 30 percent from higher secondary 20 percent illiterate or with no formal education and only 30 percent from middle education.

Only 67 who preferred breast feeding because it delays pregnancy, 46.3 percent were graduates and above, 24 percent illiterate or with no formal education, 19.3 percent with higher secondary education, 9 percent with middle school education and 1.5 percent with primary school education.

Seeing the overall responses it becomes clear that large number of affirmative responses for the statement that breast feeding is easy and convenient, it provides opportunity to relax and that it costs nothing came from those mothers who were either illiterate or with no formal education. Larger number of graduates and above considered that it was their moral duty, it strengthens the bond between the mother and the child, there is no parallel to mother's milk, it protects the child from many diseases, it is natural food for the child, it is hygenic and safe and that it prevents pregnancy. Thus it is evident that those who are educated are viewing advantages of breast feeding mainly from the point of view of child's health and welfare and also from the point of view of family planning and spacing.

Table 5.3 shows income-wise distribution of respondents' reasons to breast feed their children. It is pertinent here to look into the responses of those having a monthly family

Table No. 5.3

Income-wise Number of Respondents who preferred to Breast Feed their Child because of the following reasons (Total and Percentages)

Monthly Income in Rupees

Response	Upto 100	101-200	201-300	301-400	401-500	501-1000	1001-1500	1501-2000	2001 & above	Total
1	2	3	4	5	6	7	8	9	10	11
It is easy & convenient	(21.8) <u>37.5</u>	54 <u>(15.7)</u>	39 <u>(6.9)</u>	17 <u>(1.7)</u>	29 <u>(10.9)</u>	27 <u>(67.0)</u>	9 <u>(3.6)</u>	34 <u>(20.5)</u>	14 <u>(5.6)</u>	7 <u>(2.8)</u>
It is my moral duty	(4.1) <u>8.8</u>	6 <u>(4.7)</u>	7 <u>(0)</u>	0 <u>(4.1)</u>	6 <u>(5.5)</u>	2 <u>(1.4)</u>	20 <u>(13.5)</u>	81 <u>(54.7)</u>	15 <u>(10.1)</u>	11 <u>(7.4)</u>
I enjoy it	(18.3) <u>25.3</u>	13 <u>(7.0)</u>	5 <u>(1.4)</u>	1 <u>(9.2)</u>	7 <u>(12.7)</u>	1 <u>(1.4)</u>	8 <u>(11.3)</u>	25 <u>(35.2)</u>	7 <u>(9.9)</u>	4 <u>(5.6)</u>
It provides opportunity to relax	(28.7) <u>45.2</u>	33 <u>(16.5)</u>	19 <u>(5.2)</u>	6 <u>(10.4)</u>	12 <u>(10.4)</u>	13 <u>(11.3)</u>	4 <u>(3.5)</u>	22 <u>(19.1)</u>	4 <u>(3.5)</u>	1 <u>(.9)</u>
It strengthens my bond with the child	(11.7) <u>20.1</u>	21 <u>(8.4)</u>	15 <u>(2.2)</u>	4 <u>(1.7)</u>	3 <u>(2.2)</u>	4 <u>(26.2)</u>	24 <u>(13.4)</u>	75 <u>(41.9)</u>	24 <u>(13.4)</u>	9 <u>(5.0)</u>
It is natural food for the child	(13.1) <u>22.6</u>	40 <u>(22.0)</u>	29 <u>(9.5)</u>	7 <u>(2.3)</u>	10 <u>(3.3)</u>	12 <u>(9.5)</u>	39 <u>(12.7)</u>	118 <u>(38.6)</u>	37 <u>(12.1)</u>	13 <u>(4.2)</u>
It costs nothing	(27.5) <u>49.5</u>	50 <u>(22.0)</u>	40 <u>(9.3)</u>	17 <u>(5.5)</u>	10 <u>(18.1)</u>	6 <u>(3.3)</u>	11 <u>(6.0)</u>	34 <u>(18.7)</u>	9 <u>(4.9)</u>	4 <u>(2.2)</u>

	1	2	3	4	5	6	7	8	9	10
It is hygienic and sage	39 (13.6)	30 (10.5)	12 (4.2)	10 (3.5)	14 (4.9)	41 (14.3)	94 (32.9)	33 (11.5)	13 (4.5)	
There is no parallel to breast feeding fee-	62 (20.1)	54 (17.5)	18 (5.8)	14 (4.5)	15 (4.9)	37 (12.0)	72 (23.4)	27 (8.8)	8 (2.6)	
It makes the child strong	81 (19.2)	49 (12.0)	23 (5.6)	28 (6.9)	29 (7.1)	46 (11.3)	111 (27.2)	28 (6.9)	11 (2.7)	
It is the child's right	22 (15.1)	13 (8.9)	2 (1.4)	1 (.7)	3 (2.1)	18 (12.3)	63 (43.2)	19 (13.0)	5 (3.4)	
It protects the child from many diseases	82 (22.0)	50 (13.4)	16 (4.3)	13 (3.5)	14 (3.8)	38 (10.2)	112 (30.0)	34 (9.1)	13 (3.5)	
It delays pregnancy	5 (7.4)	13 (19.4)	3 (4.5)	0 (0.0)	3 (4.5)	4 (6.0)	30 (44.7)	6 (9.0)	3 (4.5)	

income of less than Rs. 500/- per month so as to get an insight into their attitude. This category has been taken as those below the poverty line and are the target group for many of the Government's socio-economic policies and programmes.

Of the 408 affirmative responses to the statement that it makes the child strong, slightly more than fifty percent (51.5%) are from the income group having a monthly family income of less than Rs. 500/-. Those who are having a monthly family income of less than Rs.200/-, who constitute poorest of the respondents also considered that breast feeding makes the child strong (31.9%). Thus, it is evident that irrespective of income differential, women consider breast milk to be the most important factor which makes the child strong.

To the statement that breast feeding protects the child from many diseases there had been 373 responses. In this case, more than half (53%) of the responses are from the group which are having a monthly family income of more than Rs.500/-. The group which is having a monthly family income of Rs. 1001-1500 accounted for 30 percent of the responses. Surprisingly 35.4 percent of the affirmative responses to the statement came from the poorest of the respondents (Rs.200/- and below monthly family income category).

There were 308 affirmative responses to the statement that there is no parallel to breast milk. Of these, 37.6 percent came from Rs.200/- and below monthly family income group and 15.2 percent from Rs. 201 to Rs.500/- group thus making 52.8 percent from those below the poverty line.

The statement that breast milk is natural food for the child elicited 306 positive responses. 38.6 percent of these responses are from those having monthly family income of Rs. 1001-1500. Those who are having more than Rs.500/- family income per month accounted for 67.8 percent of the responses. Only 22.6 percent of the responses were from the poorest group of having Rs.200 and below.

To the statement that breast milk is hygenic and safe there are 286 affirmative responses. Of these majority of them, that is 63.3 percent, are from the income group who is having more than Rs.500/- monthly family income. Among this group also, those who are having Rs.1001-1500 income account for 32.9 percent of the total responses. Only 24 percent of the responses came from the group having a monthly family income of Rs.200 and below.

There are 248 positve responses to the statement that breast feeding is easy and convenient. Sixty seven percent

of the responses came from those having income of Rs.500 and below. Those having Rs.200 and below monthly family income accounted for 37.5 percent of the responses.

It is significant to note that 67.6 percent of the affirmative responses to the statement that breast feeding costs nothing came from the poorer income group who are having a monthly family income of Rs.500 and below. Those who are having below Rs.200 income per month accounted for about fifty percent of the total responses. This may be due to the fact that at the subsistence level of living, the concept of special nutritive diet for the nursing mother does not exist.

When we look into the value attached by mothers to the emotional aspects of breast feeding, it is the higher income group that is having more than Rs.1000 monthly family income who account for little more than sixty percent of the responses. The poorer section i.e. Rs.500 and below group account for only 26.2 percent of the responses. Thus it appears that economic aspects are more important than emotional aspects to the lower income groups.

Regarding the statement that it is the mother's moral duty to breast feed the child only 14.3 percent of the responses are from the group having a monthly family income

of Rs.500 and below those who are having more than Rs.1000 per month income account of little over 72 percent of responses.

There are 146 responses to the statement that it is the child's right to have breast milk. Here also, about sixty percent of the responses came from those having a monthly family income of more than Rs.1000/-.

Regarding the statement that breast feeding provides opportunity to the mother to relax, 72.1 percent of the total 115 responses came from the lower income group having Rs.500 and below monthly family income.

There were only 71 affirmative responses to the statement that they enjoy breast feeding. Thirty eight percent of these responses are from the lower income group of Rs.500 and below. Those having Rs.1001-1500 account for 35.2 percent of the responses.

To the statement that breast feeding delays pregnancy there were only 67 affirmative responses. Out of these 58.2 percent are from the higher income group having family income of more than Rs.1000 per month. Those who are having Rs.200 and below income account for 26.8 percent of the responses.

Thus it is evident from the income-wise analysis of the affirmative responses to the statements that the lower income group perceives that breast feeding is easy and convenient, costs nothing, has no parallel to it, makes the child strong and gives opportunity to relax. However, their responses to the more specific attributes of breast feeding such as 'delays pregnancy', 'protects from many diseases'; 'it is hygenic', 'natural food', 'child's right', 'strengthens the bond between mother and child' and 'moral duty' are poor and the higher income group of above Rs.1000 are more aware of these advantages.

Table 5.4 gives the rural urban-wise distribution of responses from women regarding their reasons to breastfeed their children.

Analysis of Table 5.4 shows that majority of rural responses were in favour of agreeing with the statements such as, 'it provides opportunity to relax', 'I enjoy it', 'It costs nothg' and 'it is easy and convenient' whereas the urban affirmative responses were for 'It is my moral duty', 'It is hygenic and safe', 'It protects the child from many diseases', 'there is no parallel to breast milk', 'It is natural food for the child', 'It makes the child strong',

Table No.5.4

Percentage of Affirmative Responses from Rural and
Urban Respondents regarding reasons for Breast feeding
their children

Sr.No.	Reasons	Rural	Urban
1.	It is easy and convenient	53.2	28.8
2.	It is my moral duty	20.5	68.2
3.	I enjoy it	72.0	26.8
4.	It provides opportunity to relax	75.2	10.7
5.	It strengthens my bond with the child	24.2	50.4
6.	It is natural food for the child	26.4	54.0
7.	It costs nothing	62.0	46.2
8.	It is hygenic and safe	22.4	66.5
9.	There is no parallel to breast milk	36.5	56.1
10.	It makes the child strong	33.2	52.8
11.	It is the child's right	35.6	47.8
12.	It protects the child from many diseases	12.8	61.2
13.	It delays pregnancy	6.3	52.8

'It delays pregnancy' and 'It strengthens my bond with the child. The pattern of these responses are in tune with that of the education-wise and income-wise pattern of responses. This may be due to the fact that 72.4 percent of the rural respondents are illiterate whereas only 20.0 percent of the urban group belong to this category. More than fifty percent of the urban respondents are having graduation and above level of education.

Analysis regarding reasons to breastfeed the child is based on responses from mothers who had whether breastfed their children or are breastfeeding at the time of the survey. They are 642 in number. Out of the rural women 93.2 percent breastfed their children as against 81.2 percent of the urban women. However, all of them could not successfully breast (i.e. feed) their children as per their intention. They account for around 327 women, and the main reasons given were mother's illness, child's illness, lactation problem and child not liking breast milk (around sixty percent). About 40 percent of women reported unsuccessful breast feeding due to long working hours. They are overwhelmingly from the urban group.

The respondents were also asked about the average period of breast feeding their children.

The following table gives their responses.

Table No.5.5

Distribution of respondents according to the average length of the period of breast feeding (Rural Urban)

(Rural Urban)

Average length of Breast feeding	Rural	Urban	Total
4 months and less	49 (21.9)	113 (28.0)	162 (25.8)
4 + and upto 9 months	39 (17.4)	108 (26.7)	147 (23.4)
9 + and upto 14 months	27 (12.1)	74 (18.3)	101 (16.1)
Above 14 months	109 (48.6)	109 (27.0)	218 (34.7)
Total	224 (100.0)	404 (100.0)	628 (100.0)

It is evident from the table that 34.7 percent of women breast feed their children for more than 14 months, 25.8 percent for 4 months or less and 23.4 percent from 4 to 9 months. However, when we look into the rural urban differences which broadly reflect the difference in the

nature of the jobs and their work situations, we find that 28 percent of urban women breast feed their children for four months and less and only 27 percent for more than 14 months. The percentages for the rural group are 21.9 and 48.6 percent which shows that rural women breastfeed their children for longer periods than urban women. If we exclude the category of construction workers, who are mostly migrant labour from rural areas (i.e. with the same attitudinal outlook and economic background as that of rural women) we may find that women working in urban organized sector breastfeed their children for lesser period of time than rural women.

Table No.5.6

Distribution of responses showing number of hours at work vs effect on breast feeding

Number of working hours	Affects Breast feeding
5 hours and less	6 (4.5)
5 + but less than 8 hours	27 (20.5)
8 hours and above	99 (75.0)
Total	132 (100.0)

When the respondents were asked whether the work they perform affects breast feeding, 132 or around 21 percent of mothers replied in the affirmative (Table 5.6). Out of these women 75 percent belongs to those who put in more than eight hours of work and only 4.5 percent belonged to the category putting 5 hours and less. Thus it appears that longer duration of working hours has adverse affect on breast feeding.

Next the women were asked about the extent of time they spend with the child before and after their work. The following table (5.7) gives the rural-urban distribution of responses according to the time spent on the child.

Table No.5.7

Time spent on child before and after work

	Before (Time in hours)			After (Time in hours)		
	Upto one hour	1-2 hours	More than 2 hours	Upto one hour	1-2 hours	More than 2 hours
Rural	164 (70.1)	57 (24.4)	13 (5.5)	135 (57.1)	77 (32.9)	22 (9.4)
Urban	270 (66.1)	98 (24.1)	40 (9.8)	97 (24.5)	140 (34.3)	171 (41.2)
Total	434 (67.6)	155 (24.1)	53 (8.3)	232 (36.2)	217 (33.6)	193 (30.0)

Analysis of responses from 642 working monthers majority of them shows that (67.6%) spend only an hour on the child before they go to work. Only 8.3 percent of women reported that they spend more than two hours. When we look into the time spent by them after they come back from work, 36.2 percent reported that they spend about an hour, 33.8 percent between one and two hours and 30 percent more than two hours. However, rural urban variations are considerable. Higher percentage of urban women reported that they spend more than two hours after they come back from work - 41.2 percent as against 9.4 percent of rural women. This difference may be due to the nature of the job they do. Rural women are mostly doing hard physical labour whereas in case of majority of urban women it is mostly desk job involving mental work. Moreover, school teachers who go to work early and come back early may be having more time to spend with the child. When we look into the time spent by the mothers before they go to work, these differences are not marked, more than two thirds of the mothers - 70.1 percent rural and 67.6 percent urban - reported that they spend an hour or less with the child.

The respondents were asked about the breast feeding practices followed by them. Table 5.8 gives whether the mothers

feed their children on demand or as per a fixed schedule.

Table No.5.8

Percentage of Women Showing Whether the Child was
breast on demand or as per schedule

	On demand	As per schedule
Rural	76.2	23.8
Urban	58.2	41.8

The percentage of women feeding the child on demand are higher in both the rural and urban categories as compared to those feeding at fixed timings. However, there is some difference between the rural and urban categories in this respect. More than 40 percent of urban women feed their children as per schedule.

When the respondents were asked about the number of feeds they give per day to the child, Table No.5.9 gives the distribution of responses rural urban wise.

It is evident from the table that higher percentage of rural women feed their children more than six times. They account for 74.6 percent of the rural lactating mothers whereas

Table No.5.9

Distribution of women according to the number of feeds they give to the child per day

	Number of feeds per day				Total
	3 or less	4 to 6	7 to 9	More than 9	
Rural	5 (3.8)	28 (21.6)	39 (30.0)	58 (44.6)	130 (100.0)
Urban	18 (11.3)	75 (46.8)	35 (21.9)	32 (20.0)	160 (100.0)
Total	23 (7.9)	103 (35.6)	74 (25.5)	90 (31.0)	270 (100.0)

in the case of urban women it is only around 42 percent.

There are about 46.8 percent of women in urban sector who feed their children from to six times a day 21.9 percent 7 to 9 times and 20 percent more than nine times. Those who feed three times or less account for a very small percentage in the rural sector (3.8%) as compared to the urban sector 11.3 percent.

The working mothers were also asked to give their opinion about bottle feeding as compared to breast feeding.

Table 5.10 gives the age-wise distribution of women according to their responses.

Table No.5.10

Opinion	Age (in years)					Total
	upto 20	21-25	26-30	31-35	36 and above	
Equally good	4 (10.0)	5 (12.5)	20 (50.0)	9 (22.5)	2 (5.0)	40 (100.0)
Some what good	6 (1.8)	76 (23.2)	81 (24.7)	98 (29.9)	67 (20.4)	328 (100.0)
Not at all good	11 (7.1)	44 (28.6)	72 (46.8)	22 (14.3)	5 (3.2)	154 (100.0)
Can not say	7 (7.2)	30 (30.9)	37 (38.1)	19 (19.6)	4 (4.1)	97 (100.0)
Not applicable /no response	17 (13.0)	47 (36.1)	52 (39.6)	14 (10.6)	1 (0.7)	131 (100.0)

Out of the 750 women, 328 or 43.7 percent of women stated that bottle feeding is 'somewhat good' as compared to breast feeding. However, if we take into account who had already one child or more 51.1 percent made the statement that it is somewhat good which means that they may not choose bottle feeding to breast feeding but wouldnt mind using bottle feed if necessary. This may be the group which needs motivation to

make all efforts to breast feed the child and avoid bottlefeed. Those who are positively aware of the fact that breast feeding is better than bottle feeding stated that the latter is not at all good. The number of women who made this statement are 154 or 20.5 percent of the sample or 24 percent of working mothers. It is encouraging to note that only 40 women stated that bottle feeding is equally good. If we look into the age-wise composition of those who made the statement that bottle feeding is somewhat good, 50.3 percent belonged to above 30 years group. The respondents in the age group of 26 to 30 years are more positive in their attitude towards breast feeding as they higher percentage of them i.e. 46.8 percent stated that bottle feeding is not at all good.

Education-wise distribution of responses to the opinion regarding bottle feeding versus breast feeding is given in Table 5.11.

Higher percentage of women who stated that bottle feeding is somewhat good as compared to breast feeding, belong to those who did graduation and above (39.3%) as against the 33.2 percent from illiterate and those with no formal education. It is

Table No.5.11

Responses showing education-wise distribution of women's opinion (Total and Percentages) about bottle feeding in comparison to breast feeding

Opinion	Illiterate No formal Education	Primary	Middle	Higher Secon- dary	Gradua- tion and above	Total
Equally good	10 (25.0)	0 (.0)	0 (.0)	4 (10.0)	26 (65.0)	40 (100.0)
Somewhat good	109 (33.2)	3 (.9)	16 (4.9)	71 (21.6)	129 (39.3.)	328 (100.0)
Not at all good	68 (44.1)	6 (3.9)	13 (8.4)	30 (19.5)	37 (24.0)	154 (100.0)
Can not say	48 (49.5)	0 (.0)	7 (7.2)	9 (9.3)	33 (34.0)	97 (100.0)
Not Applica- ble/ No response	30 (22.9)	4 (3.0)	7 (5.3)	37 (28.3)	53 (40.5)	131 (100.0)

interesting to note that of those who stated that bottle feeding is not at all good, 44.1 percent belonged to the illiterate group and only 24 percent to graduates and above group. Even if include those with higher secondary education the percentage comes to 43.5 percent only. Out of the 40 mothers who stated bottle feeding to be equally good, 26 respondents belonged to the graduation and above level educated group.

Income-wise distribution of women who stated that bottle feeding is somewhat good shows that 41.7 percent belonged to the

Table No.5.12

Responses showing income-wise distribution
of women's opinion (Total and Percentages)
about bottle feeding in comparison to breast
feeding

Income in Rupees

Opinion	Upto 200	201-400	401-500	501-100	1001- 1500	1501- 2000	2000 above	Total
Equally good	8 (200)	2 (5.0)	2 (5.0)	2 (5.0)	17 (42.5)	6 (15.0)	3 (7.5)	40 (100.)
Somewhat good	87 (26.6)	42 (12.8)	20 (6.1)	42 (12.8)	97 (29.6)	30 (9.1)	10 (3.0)	328 (100.)
Not at all good	71 (46.1)	21 (13.6)	17 (11.0)	14 (9.1)	25 (16.2)	2 (1.3)	4 (2.6)	154 (100.)
Can not say	27 (27.9)	22 (22.7)	11 (11.3)	4 (4.1)	18 (18.6)	13 (13.4)	2 (2.1)	97 (100.)
Not appli- able/ No response	29 (22.1)	16 (12.3)	13 (9.9)	19 (14.5)	35 (26.7)	16 (12.2)	3 (2.3)	131 (100.)

group who had family income of more than Rs. 1000 per month. However, of those who stated that bottle feeding is not at all good, 52.6 percent belonged to those who had monthly family income of Rs.300 or less as compared to the 20.1 percent of above Rs. 1000 monthly income group. Of those 40 who stated

that bottle feeding is equally good, 26 belonged to the income group having a monthly family income of more than Rs.1000/-.

Table No.5.13

Responses showing occupation-wise distribution of women's opinion (Total and Percentages) about bottle feeding in comparison to breast feeding

Occupation

Opinion	Indus- trial workers	Govt. employees	School teachers	Construc- tion workers	Agricul- tural workers
Equally good	2 (1.1)	16 (14.8)	10 (9.5)	3 (3.0)	9 (3.6)
Somewhat good	102 (54.6)	53 (49.1)	52 (49.5)	31 (31.0)	90 (36.0)
Not at all good	39 (20.8)	8 (7.4)	7 (6.7)	22 (22.0)	78 (31.2)
Can not say	8 (4.3)	14 (13.0)	15 (14.3)	31 (31.0)	29 (11.6)
Not appli- cable/No response	36 (19.2)	17 (15.7)	21 (20.0)	13 (13.0)	44 (17.6)
Total	187 (100.0)	108 (100.0)	105 (100.0)	100 (100.0)	250 (100.0)

Analysis of responses regarding the mothers' opinion about bottlefeeding vs breast feeding among industrial workers 54.6 per cent stated bottlefeeding to be somewhat good as

against 49.5 percent of school teachers, 49.1 percent of Government employees, 31 percent of construction workers and 36 percent of agricultural labour. When we look into those who stated bottlefeeding to be not at all good, 31.2 percent of agricultural labourers stated it to be so as against 22 percent of construction workers, 20.8 percent of industrial workers, 7.4 percent of Government employees and 6.7 percent of school teachers. It is to be noted that out of the 40 responses to the statement that bottlefeeding is equally good Government employees and school teachers accounted for 16 and 10 in number respectively.

The respondents were also asked about the age at which they weaned the child. Of the 750 sample 352 are non-lactating mothers and 108 are first time pregnant mothers. Of these 352 mothers, 37 percent weaned their children after 14 months of breast feeding, 24.1 percent between 9 and 14 months, 19.6 percent between 4 and 9 months and around the same percent before 4 months of age.

Higher percentage of rural women weaned their children after 14 months of age as against 23.7 percent of urban women who weaned their children at that age. Around 25.5 percent of

Table No.5.14

Distribution of women according to the age at which they weaned their children

	Rural	Urban	Total
Less than 4 months	5 (5.3)	55 (25.5)	60 (19.3)
4 + and upto 9 months	4 (4.2)	57 (26.4)	61 (19.6)
9 + and upto 14 months	22 (23.2)	53 (24.4)	75 (24.1)
Above 14 months	64 (67.3)	51 (23.7)	115 (57.0)
Total	95 (100.0)	216 (100.0)	311 (100.0)

urban women their child at less than four months of age as against 5.3 percent of rural women.

The respondents were asked whether anybody advised them to (a) breast feed their child (b) to continue breast feeding (c) weaning and (d) bottle feeding. Around seventy percent of them stated that they got the advise. However, when they were asked about who advised them, majority of them replied that they got the advice from family members, that is, husband,

parents-in-law and parents. Small number of respondents, however, mentioned about health functionaries. Table 5.15 gives the number of rural and urban people who received advice.

Table No.5.15

Rural-urban distribution of women who received advice from health functionaries

Advice regarding

	Breast feeding	Continuation of breast feeding	Weaning
Rural	5	5	26
Urban	32	35	42

Only six respondents all urban, mentioned that they received advice from their doctors to bottle feed their child.

The respondents were asked whether they agree with the doctors' opinions that breast feeding (a) protects the child from certain diseases like diarrhoea, respiratory tract infections etc. and (b) it delays pregnancy. Out of the 750 respondents, 240 rural and 475 urban women had expressed

agreement with the first statement which shows that they are aware of this advantage of breastfeeding. However, in respect of the second statement 121 rural and 223 urban women agreed and all of them suggested that the government should encourage breast feeding due to its advantage in respect of family planning, spacing of children. They were further probed about how it should be done at different levels, that is, Government employees household and community. Their responses were given in the following table No.5.16.

Table 5.16 gives an account of expectations of respondents with regard to facilities to be extended by the Government, the employer, the household and the community. Availability of maternity leave and shorter working hours were expected both from the government and the employer. Creche facilities/ permission to feed the baby during working hours were expected from the government, the employer as well as the community. Arrangement for nutritive food/incentive to breast feed the child was expected from the government and the employer. Provision for health education to encourage breast feeding was expected from all - the government, the employer, the community and the household.

Table No.5.16

Occupation-wise distribution of responses from working women regarding facilities to be extended by Government, employer, household and the community

Occupation	Maternity leave should be extended/ shorter working hours		Creche facilities to be provided/ permission to feed the baby during working hours*		Arrangement for provision for nutritive food/ health education Inconvenient to to encourage breast feed the breast feeding child	
	Govt.	Employer	Govt.	Employer	Govt.	Employer
Industrial workers	18	44	24	107	10	27
Government servants	68	46	18	35	18	16
School teacher	25	24	20	57	20	10
					22	38
					13	37
					1	1

*Regarding facilities from the household, 48 industrial workers, 63 school teachers and 58 Government servants mentioned that cooperation from the household and reduced work load at house and encouragement from the elders would facilitate breast feeding of the child.

Those who mentioned about maternity leave also expressed longer maternity leave so that the child could be looked after well. They are all from organized sector. In their opinion provision for shorter working hours could ease the problem to a great extent as then they would be able to spend more time with the child. Higher percentage of industrial workers mentioned that ~~xx~~ Creche facilities to be provided by the Government, employer and the community. Some women mentioned that arrangements for nutritive food.

Out of the total 750 respondents, 102 rural and 161 urban women only stated that they would like to participate or contribute in such a programme. When these 263 women were further asked about what would be their contribution nobody was able to give specific reply. This shows while most women would like the Government and employer and community to encourage breast feeding in view of its definite advantage to the child and its contribution to spacing of children, many of them showed hesitancy in participating in programmes aimed at promoting breast feeding and even among those who stated that they would like to participate, none could mention about the specific manner in which they would like to participate.

The women were also asked about what media/source would be more useful in educating women about the advantages of

breast feeding. Responses of the women are presented occupation-wise in Table 5.17. It is evident from the table that the maximum number of responses came in favour of Television followed by radio, community level organizations (such as Kirtan, Bhajan or Mahila Mandals) documentary movies, posters and traditional media (such as puppet shows). It is to be noted that through television and radio were more frequently mentioned, it came mostly from women working in the urban organized sector, that is, from industrial workers, Government servants and school teachers. This is in consonance with their responses to the question how frequently they watch television and listen to radio. Agricultural labour and construction workers mentioned more about community level organizations than the other occupational groups. The number of responses favouring health functionaries and doctors to educate about the advantages of breast feeding are less when compared to the other media/sources.

Table No.5.17

Occupation-wise distribution of responses
regarding the media/source suggested to
educate women about breast feeding

Media/source suggested

Occupation	Television	Radio	Documentary Movies/ posters/ Traditional Media	Community level org- anizations	Others such as health function- aries/ Doctors
Industrial workers	162	129	61	33	51
Government servants	69	56	49	17	22
School teachers	93	58	52	16	12
Construction workers	14	34	4	36	5
Agricultural labour	96	129	23	112	11
Total	434	406	189	214	101

Conclusions and Suggestions

There is scientifically established evidence to show that breast feeding is advantageous to the child, to the mother and to the community at large. Perhaps, the best known benefit of breast feeding is its protection against illness such as diarrhea, respiratory infection, otitis media and other infectious agents. Other protective effects of breast feeding include protection against development of certain lymphoma, diabetes, certain allergies and some growth and developmental problems. The positive nutritional benefits of breast-feeding are well known. In addition to all these, recent research has established that breast feeding has an effect on fertility and it is beginning to explain the mechanisms and efficacy of breast feeding for fertility regulation. Many studies have brought out that full breast feeding from the birth of the child upto 4 to 6 months of her/his age prevents next pregnancy and thereby helps to spacing of children. Breast feeding practices which are relevant in this context are stated to be frequent breast feeding with no long intervals and no other food or nipple introduced to the infant. Analysis of data from several countries reveals that a 25 percent decline in breast feeding would result in a 2 to 16 percent increase in fertility (Miriam H.Labbok; Breast feeding and Fertility). High

fertility carries health and economic implications. Therefore promotion of breast feeding is vital to maintain the existing level of breast feeding where it is widely practiced and to increase its prevalence when it is declining.

Awareness of the advantages of breast feeding to the overall health of mother and child and understanding of the processes through which breast feeding prevents high fertility rates has led to Governments of developing countries to find out ways and means in which they can sustain and, if possible, to promote full breast feeding of children. The effort is to formulate an integrated mother-child health and family planning policy. This requires scientific understanding of the current practices of breast feeding among different socio-economic groups, the reasons underlying these practices, the problems faced by the mothers in fully breast feeding the children, the perceptions of the mothers towards breast feeding and weaning practices and their expectations regarding the help from the government, the family and the community. The present study aims at looking into all these aspects but with reference to mothers working in organized and unorganized sectors only.

The socio-economic background of the sample of respondents that have been selected for the purpose of the

study reflects the picture that generally prevails among the various occupational groups in the rural and urban areas. Majority of the respondents were Hindus, forty percent of them belonging to backward and lower castes. The difference in the caste composition is wide as between rural and urban respondents. Among rural working mothers, 83 percent belonged to the backward or lower castes as against 17.6 percent of urban respondents.

More than two-thirds of the rural working women were illiterate as against 20 percent of urban women. Fifty percent of the urban working mothers have graduate and above level education.

Income level differences also are wider as between the rural and urban groups. Those having monthly family income of less than Rs 1000 are 76.8 percent in rural as against 20 percent in urban areas. When we take the sample as a whole, 50 percent are having a monthly family income of more than Rs 2000 and 38.9 percent less than Rs 1000.

When we look into the age at marriage rural urban differences are wider - 90 percent of rural respondents got married before 19 years of age (32 percent by 14 years) whereas 48.2 percent of urban women got married between 20 and 24 years of age.

Fifty one percent of the total sample had joint family set up. Fortyeight percent of rural and 52 percent of urban women reported having joint families.

Working women spend minimum of eight hours time outside their home. This includes commuting time from residence to workplace and back. Urban women spend more time than rural women due to distances involved in commuting from home to work place and back. When we look into the occupational categories, women working in organized sector spend more time outside home. Within the organized sector also, women working in Government offices and industrial establishments spend more time outside their home. This is partly due to the fact that location of work places are farther away from their residences. For example, more than fifty percent of the Government servants commute by bus by more than fifteen kilometres per day and take one and a half to two hours time for this purpose. Very few working women reported having own transport facilities.

This may be one of the main reasons coming in the way of women taking their children to work place for breast feeding. Only 25 percent of the sample respondents stated that they take their child to wok place. This is mostly true of agricultural workers and construction workers. In the organized

sector only 10.2 percent of the women take their children to work place and all of them belong to the category of industrial workers. They also reported that very often their employer objects to it. None of the teachers and government servants take their child to work place. Regarding the facilities provided by the employer at the work place to breast feed the child only 5.6 percent of women reported that they get creche facilities. They are: construction workers 14.0 percent and industrial workers 7.4 percent. None of the women reported that their employer permits them to go home to breast feed their child.

Out of those who are not taking their children to work place, 79 percent depended on the support extended by members of the family such as parents, parents-in-law, older siblings etc. to look after the child in their absence. This is more so in case of government servants. Only twenty one percent of women who are not taking their child to work place depend on creches to look after their children in their absence. The reason frequently mentioned was that this will be interference in their work.

Regarding maternity leave facility, it is not available to agricultural labour and construction workers. In the

organized sector also some industrial workers mentioned that they do not get maternity leave but get only leave without pay. Thirty percent of the those who availed maternity leave extended the leave period beyond the stipulated twelve weeks. Higher percentage of them are Government employees as compared to industrial workers and school teachers. Main reason for extending the leave is that the child was too small and there was nobody to look after the child followed by that it facilitates breast feeding.

Regarding adequacy of maternity leave, majority (55.2 percent) mentioned that the leave granted to them is not sufficient to fully breast feed the child. Occupation-wise we find that this is more frequently mentioned by government servants, followed by industrial workers as compared to school teachers. Women in the unorganised sector in general and agricultural labour in particular are unable even to comprehend the idea of maternity leave.

Ninety one percent of those who mentioned inadequacy of maternity leave suggested that additional leave with either full or half pay should be provided to facilitate full breast feeding of the child.

The problems faced by working women on extending maternity leave were by way of stoppage of bonus in the case

of industrial workers and extra hours of work to complete pending work in the case of school teachers. However, these constitute a small percentage of the women working in the organised sector.

Out of the total 750 respondents 642 or 85.6 percent had either breast fed or have been breast feeding their children. Out of the rural women 93.2 percent breast fed their children as against 81.2 percent of the urban women. However all of them could not fully breast feed their children as per their intention. They account for 327 women and the main reasons given were mother's illness , child's illness, lactation problem, child not liking the milk and long hours of work. The last mentioned reason was reported by 40 percent of the women.

Age-wise analysis of the responses from women regarding the reasons for breast feeding their children shows that the 26 to 30 years age group's responses were the highest in respect of all the statements except in case of the statement that breast feeding provides opportunity to relax. About 41.8 percent of women from 26 to 30 years of age group and 35.8 percent of 21 to 24 years of age group were aware of the importance of breast feeding for spacing and familing planning purposes.

Large number of affirmative responses for the statement that breast feeding is easy and convenient provides opportunity to relax and it costs nothing came from those who were either poor, illiterate or had no formal education. Larger number of graduates and above considered it their moral duty. Perhaps such as that it helps strengthening of bond between mother and child, breast milk having no parallel, natural food for the child, hygienic and safe, protection from diseases and prevention from pregnancy came from mothers who were graduates and above. Those who are educated view advantages of breast feeding mainly from the point of view of child's health and welfare and also from the point of view of family planning and spacing.

Irrespective of income differential, women consider breast milk to be the most important factor which makes the child strong (83.4% of the total sample).

Lower income group perceived that breast feeding is easy and convenient, costs nothing, has no parallel to it, makes the child strong and gives opportunity to relax whereas higher income groups are more aware of the specific advantages such as it delays pregnancy, protects the child from certain diseases, it is hygienic, natural food, child's right-moral duty and strengthens the bond between mother and child.

Rural women breast fed their children for longer period as compared to urban women (excluding construction worker category as they are mostly migrant labour from rural areas).

Longer duration of working hours has adverse affect on breast feeding.

Working mothers are not able to spend more time with their children. Majority of the mothers (70.1% rural and 67.6% urban) reported that they spend an hour or less with the child, before and after work.

Percentage of women feeding on demand are higher in both rural and urban areas. Those who feed the child on fixed schedule basis are only 24 per cent in rural and 42 per cent in urban areas.

Women in rural areas feed more frequently than women in urban areas. Higher percentage of rural women feed more than six times a day as compared to those in urban areas (41.9%).

About 95 percent respondents agreed with the statement that breast feeding protects children from many diseases. The other statement put forward to them was with regard to breast feeding delays pregnancy. For this the affirmative answers were 46 percent only.

Those who are positively aware of the fact that breast-feeding is better than bottle feeding are motivated persons and know the advantages of breast feeding. Respondents were asked about their opinion with regard to breast feeding versus bottle feeding. Out of the 750 respondents 20.5 percent only stated that bottle feeding is not at all good. A large segment of the respondents, 56.6 percent stated either that the bottle feeding is somewhat good (328 in number) or can not say (97). Those who made the statement belong to 25 years and above age group, have education upto graduation and above, have family income of more than Rs 1000 per month and are working in the urban organized sector.

About 70 percent respondents got advice with regard to breast feeding, continuing breast feeding, bottle feeding and weaning. Majority got the advice from family members. Very small number of respondents mentioned about advice from health functionaries.

Majority of the respondents wanted the government, the employers and the community to encourage breast feeding. They suggested that the government as well as the employers should look into the aspects of maternity leave, shorter working hours, creche facility, permission to feed the baby during working

hours, health education and supplementary nutrition. The community and the household could extend helping hand in looking after the child during mother's working hours and help in providing health education as well as nutritive food.

Television was mentioned by maximum number of respondents as the best media/source for educating the women followed by radio, community level organization, documentaries, posters and traditional media. When we look into the urban-rural differences, majority of urban respondents mentioned television as the preferred media whereas rural respondents mentioned about community level organizations.

It is evident from the foregoing conclusions of the survey that majority of mothers still intend to breastfeed their children. They are aware that it helps the baby to grow and be healthy. However, there are certain constraints in the way of xxxix breast feeding their children fully and for longer periods. Apart from physical and practical constraints there appears to be lack of full knowledge and awareness regarding the range of advantages of full breast feeding and also the processes through which it benefits the child and mother. Although this is true of mothers working in urban organized and rural unorganized sectors, it is more so in the case of rural

unorganized sector. However, larger proportion of the rural women than the urban women breast feed for larger periods mainly due to traditional beliefs and norms and monetary burden involved in bottle feeding. It is heartening to find out that overwhelming majority of the mothers want to breast feed their children. The gap between initial intention and success in achieving the same was partly due to the difficulties they face in coping with the work and family situation and the demands involved in feeding the child. The following paragraphs suggest the type of measures that could be initiated by Government, employer etc. in helping them overcome~~the~~ problems.

SUGGESTIONS

One of the problems coming in the way of full breast feeding the child on a sustained basis is reported to be longer working hours. In addition to the actual working time on the job, in the urban organized sector women are also spending more time on ~~commumity~~ commuting to and from work place due to long distances involved. It has also been found that working women generally do not prefer to take the child to work place as it interferes with their work and this is more true of respondents in the urban organised sector in view of long distances from residence to work place.

Full breast feeding will, however, be possible when we are able to bring the child and mother together. There are several ways in which the togetherness of the mother and child could be promoted. The respondents also were asked about their suggestions in this regard. Each one of them have to be weighed against their pros and cons.

One of the suggestions frequently made by working women, both in organized and unorganized sectors, is that there should be creche facility. This could be thought of at either the site of work or nearer their homes. In the latter case, the child may be looked after in the absence of the mother but it is not possible to bring the mother and child ^{together} to promote full breastfeeding. Therefore, the other alternative could be to have the creche at work place so that mother be permitted to frequently visit and breastfeed the child. This may cause some hindrance to the actual job the women do and the employers may not be viewing it favourably. However, this could be overcome in the organized sector through suitable legislation to this effect. The more difficult problem in adopting this measure would be to induce the mother to bring her child to work place which in case of the urban organized sector ^(more in metropolitan cities) is far away from their residences. As the survey pointed out, very few working women have transport vehicle of their own or staying near the working place and an overwhelming majority of them

commute by private buses more than fifteen kilometres per day. However, this will not be a problem if the employer provides transportation facility or pays lumpsum amount towards transportation cost for the full breastfeeding period of, say six months. Alternatively, the employer may provide women employees housing facility nearer to their place of work to enable them to breast feed their children ^{as} well as have more time with them before and after working hours. This is one welfare measure which Government as an employer can easily extend to their women employees on priority basis. This measure doesn't cost much to the exchequer but immensely benefits the mothers and their children. It may be mentioned here that the problem of transportation cost is not applicable to the rural unorganized sector or to the construction workers who live on the site in urban areas. In both these cases, what is required is good creche facility with the employer permitting them to breast feed the child at frequent intervals.

Another measure that could be suggested to bring the mother and child together to enable full breast feeding on a sustained basis, is by granting maternity leave. ~~Maternity leave~~. Maternity leave facility is available to many of the organized sector employees. As our survey indicated, this facility is being denied to some industrial workers by treating the

maternity period as leave without pay. It is to be mentioned here that maternity leave facility is available only to permanent employees. It is suggested that it should be extended to temporary employees also. It had been mentioned by many of the employees who availed the maternity leave that they extended it beyond the stipulated twelve weeks. This indicates that women employees feel that the period is inadequate to look after the child and breastfeed it fully. In view of this, it is suggested that the period of maternity leave should be six months instead of the present three months with full pay and another six months with half pay. This measure, however, should be limited to two children only during their service time. The cost involved in adopting this measure if weighed against the alternative of providing transportation or paying for transportation for limited period of time to the employee may be more beneficial to the mother, the child and the community at large.^{The} period of six months maternity leave (after delivery) has been suggested keeping in view the research finding that full and frequent breast feeding of the child for four to six months prevents next pregnancy and helps spacing of children. Apart from being advantageous in promoting family planning, it would help to reduce the present high

mortality rate among infants.

If we look into the affirmative responses of working ~~women~~ women to the statements regarding the advantages of breast-feeding, we find that an overwhelming majority agreed that it makes the child strong. Again when they were asked to give their opinion about bottle feeding versus breastfeeding, large number of positive responses were to the statement that bottle feeding is somewhat good. When we take these responses together we find that majority of the working mothers are aware that breast milk is good for the child and that it protects the child from many diseases. However, very few mentioned about the advantage of full breast feeding as an aid to spacing children. In view of this, there is need to educate the mothers about the advantages of full breast feeding and the processes they should follow in breast feeding and weaning, to derive maximum advantages to the mother and child. Unless they are made fully conscious about the advantages of breast feeding, the time of weaning etc. and the harmful effects of bottle feeding they will not be motivated to take initiatives in the event of obstacles faced to fully breast feed their children. It is also evident from the reasons given by the working mothers that majority of them are first and foremost concerned about the welfare of their children. That means, if they are made aware of the advantages

in a more specific way they will do the needful.

It is to be emphasized here that it is necessary to educate the working women not only about the advantages of breast feeding but also about the various breast feeding and weaning practices. Unless suitable breast feeding practices are followed, breast feeding as a tool of family planning will fail. The optimal breast feeding patterns for child survival and birth spacing recommended are: (i) starting breast feeding immediately after the birth; (ii) exclusive breast feeding of the child for four to six months; (iii) frequent breast feeding of the child on demand; (iv) avoiding using bottle, pacifiers or supplementary food; (v) continuing to breast feed the child while introducing supplementary food; and (vi) giving nutritive diet for the nursing mother.

under

Even among the various groups/survey, in the organised and unorganized sector^s, the level of awareness and knowledge varies. Therefore, there is need to tune the mass education programme to suit their requirements. Accordingly we have to choose the machinery of administration and to undertake the task and the media through which to impart the education. The survey reveals that majority of the working mothers received

advice regarding breast feeding and weaning from family members.

Very few mentioned about health functionaries and medical personnel. There is need to look into the functions and functioning of the present health administration machinery both in rural and urban areas and accordingly strengthen it so that they could impart education in a scientific way.

